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MCPIfLLIPS, ROBERTS & DEANS. PLC

CERTIFIED PUBLIC ACCOUNTANTS

TOWN POINT CENTER, SUITE 1100
NORFOLK, VIRGINIA 23510

POST OFFICE BOX 1180

NORFOLK, VIRGINIA 23501-1180

MEMBERS

AMERICAN INSTITUTE OF CERTIFIED
PUBLIC ACCOUNTANTS

VIRGINIA SOCIETY OF CERTIFIED
PUBLIC ACCOUNTANTS

NATIONAL ASSOCIATED
CERTIFIED PUBLIC
ACCOUNTING FIRMS

(757) 640-7190

FAX (757) 640-7297

ANDREW COHEN & RITA COHEN
3750 JEFFERSON BOULEVARD
VIRGINIA BEACH, VA 23455

DEAR ANDREW AND RITA:

ENCLOSED ARE THE ORIGINAL AND ONE COPY OF YOUR 2007 INCOME TAX RETURNS AND
2008 ESTIMATED TAX VOUCHERS AS FOLLOWS...

2008 1040-ES U.S. ESTIMATED TAX VOUCHERS
2007 1040 U.S. INDIVIDUAL INCOME TAX RETURN
2008 VIRGINIA ESTIMATED TAX VOUCHERS
2007 VIRGINIA INCOME TAX RETURN

THE ORIGINAL OF EACH RETURN SHOULD BE DATED, SIGNED AND FILED IN
ACCORDANCE WITH THE FILING INSTRUCTIONS ATTACHED TO THE COPY OF THE
RETURN. THE COPY SHOULD BE RETAINED FOR YOUR FILES.

THE RETURNS WERE PREPARED PRIMARILY FROM DATA FURNISHED TO US.
BEFORE SIGNING THE RETURNS, YOU SHOULD REVIEW THE STATED INCOME,
DEDUCTIONS, DEPENDENTS, ETC., TO ENSURE THAT THERE ARE NO OMISSIONS OR
MISSTATEMENTS.

UPON AN AUDIT OF THE RETURNS, REQUESTS MAY BE MADE FOR SUPPORTING
DOCUMENTATION. THEREFORE, WE RECOMMEND THAT YOU RETAIN ALL PERTINENT
RECORDS.

THE CONTRIBUTION YOU ARE CLAIMING TO YOUR TRADITIONAL IRA FOR 2007 IS \$
4,000.

THE CONTRIBUTION YOUR SPOUSE IS CLAIMING TO THEIR TRADITIONAL IRA FOR 2007
IS \$ 1,788.

TO ENSURE THAT YOUR SPOUSE'S IRA CONTRIBUTION IS ALLOWABLE, \$1,788. MUST
BE DEPOSITED TO YOUR SPOUSE'S ACCOUNT NO LATER THAN APRIL 15, 2008.

PLEASE NOTE THAT IF YOU HAVE CLAIMED AN IRA DEDUCTION IN THE RETURN,
IT MUST BE FULLY FUNDED NO LATER THAN APRIL 15, 2008. ANY OTHER
PENSION OR PROFIT SHARING CONTRIBUTION MUST BE FULLY FUNDED NO LATER
THAN THE DUE DATE OF THE RETURN INCLUDING EXTENSIONS.

WE SINCERELY APPRECIATE THIS OPPORTUNITY TO SERVE YOU. PLEASE CONTACT
US IF YOU HAVE ANY QUESTIONS OR IF WE MAY BE OF FURTHER ASSISTANCE.

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ANDREW COHEN & RITA COHEN
INSTRUCTIONS FOR FILING FORM
1040

U.S. INDIVIDUAL INCOME TAX RETURN FOR 2007

SIGNATURE..

THE ORIGINAL RETURN SHOULD BE SIGNED (USE FULL NAME) AND DATED ON
PAGE 2 BY THE TAXPAYER AND SPOUSE.

OVERPAYMENT..

YOUR RETURN SHOWS A \$31,044. OVERPAYMENT. OF THIS AMOUNT, NONE WILL
BE REFUNDED TO YOU AND \$31,044. HAS BEEN APPLIED TO YOUR 2008
ESTIMATED TAX.

FILING..

FILE YOUR SIGNED RETURN BY APRIL 15, 2008 WITH:

DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE CENTER
ATLANTA, GA 39901-0002

PLEASE NOTE THAT IF YOU HAVE CLAIMED AN IRA DEDUCTION IN THE RETURN,
IT MUST BE FULLY FUNDED NO LATER THAN APRIL 15, 2008. ANY OTHER
PENSION OR PROFIT SHARING CONTRIBUTION MUST BE FULLY FUNDED NO LATER
THAN THE DUE DATE OF THE RETURN INCLUDING EXTENSIONS.

MAILING..

YOUR RETURN SHOULD BE MAILED BY EITHER REGISTERED OR CERTIFIED
MAIL, WITH THE SENDER'S RECEIPT POSTMARKED TO PROVE MAILING BEFORE
THE DUE DATE.

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ANDREW COHEN & RITA COHEN
 INSTRUCTIONS FOR FILING FORM
 1040-ES
 U.S. INDIVIDUAL ESTIMATED TAX FOR 2008

PAYMENT OF ESTIMATED TAX..

THE APPROPRIATE VOUCHER FORM SHOULD ACCOMPANY EACH PAYMENT AS
 FOLLOWS...

VOUCHER	ON OR BEFORE-	AMOUNT
1	APRIL 15, 2008	\$
2	JUNE 16, 2008	\$
3	SEPTEMBER 15, 2008	\$
4	JANUARY 15, 2009	\$

OVERPAYMENT OF 2007 INCOME TAX CREDITED AGAINST 2008 TAX		-----
TOTAL 2008 ESTIMATED TAX PAYMENTS		\$
ESTIMATED INCOME TAX TO BE WITHHELD IN 2008 ...		
ESTIMATED CREDITS		-----
TOTAL ESTIMATE OF 2008 INCOME TAX		\$
		=====

FILING..

EACH VOUCHER, TOGETHER WITH A CHECK OR MONEY ORDER MADE PAYABLE
 TO "UNITED STATES TREASURY", SHOULD BE FILED WITH:

INTERNAL REVENUE SERVICE
 P.O. BOX 105225
 ATLANTA, GA 30348-5225

YOUR SOCIAL SECURITY NUMBER AND "2008 FORM 1040-ES" SHOULD BE
 INDICATED ON EACH CHECK OR MONEY ORDER.

YOU SHOULD RETAIN VOUCHERS 2, 3, AND 4 AND FILE THEM AS INDICATED
 ABOVE.

CARRYOVERS TO 2008
 =====

	REGULAR TAX -----	ALTERNATIVE MINIMUM TAX -----
SHORT-TERM CAPITAL LOSS		
LONG-TERM CAPITAL LOSS		
UNRECAPTURED NET SEC. 1231 LOSSES		
OFFICE-IN-HOME/VACATION HOME EXPENSES		
CONSERVATION EXPENSES (SCH. F)		
SEC. 179 EXPENSE		
DEPLETION		
PASSIVE ACTIVITY LOSS	41,522.	41,054.
INVESTMENT INTEREST EXPENSE	NONE	NONE
AT-RISK		
AT-RISK NONDEDUCTIBLE EXPENSE		
SEC. 911 FOREIGN HOUSING COST DEDUCTION		
100% - CHARITABLE CONTRIBUTION DEDUCTION		
50% - CHARITABLE CONTRIBUTION DEDUCTION		
30% - CHARITABLE CONTRIBUTION DEDUCTION		
SPECIAL 30% - CHARITABLE CONTRIBUTION DEDUCTION		
20% - CHARITABLE CONTRIBUTION DEDUCTION		
FOREIGN TAX CREDIT		
TOTAL GENERAL BUSINESS CREDITS		
INVESTMENT TAX CREDIT		
WORK OPPORTUNITY CREDIT		
QUALIFIED RAILROAD TRACK MAINTENANCE		
RESEARCH CREDIT		
LOW-INCOME HOUSING CREDIT		
DISABLED ACCESS CREDIT		
ENHANCED OIL RECOVERY CREDIT		
EMPOWERMENT ZONE EMPLOYMENT CREDIT		
INDIAN EMPLOYMENT CREDIT.....		
CREDIT FOR EMPLOYER S.S. TAX ON CERTAIN TIPS		
WELFARE TO WORK CREDIT		
RENEWABLE ELECTRICITY PRODUCTION CREDIT		
HURRICANE KATRINA EMPLOYEE RETENTION		
EMPLOYER-PROVIDED CHILD CARE SERVICES CREDIT		
SMALL EMPLOYER PENSION PLAN START UP COSTS		
BIODIESEL FUELS		
LOW SULFUR DIESEL FUEL PRODUCTION		
DISTILLED SPIRITS		
PRIOR YEAR CARRYOVERS		
MINIMUM TAX CREDIT		

ANDREW COHEN & RITA COHEN

**Two Year Comparison
2007 to 2006**

Description	2007	2006	Difference
Gross Income			
Wages, salaries, tips, etc.	5,788.	4,624.	1,164.
Taxable interest	2,580.	2,816.	-236.
Ordinary dividends	43,383.	67,639.	-24,256.
Taxable refunds, credits, or offsets of state and local income taxes	3,731.	5,633.	-1,902.
Alimony received			
Business income or (loss)	-8,428.	-18,544.	10,116.
Capital gain or (loss)	411,996.	407,589.	4,407.
Other gains or (losses)			
IRA distributions, pensions and annuities		10,176.	-10,176.
Rent and Royalty Income			
Partnership and S Corporation Income	-55.	NONE	-55.
Estate and Trust Income			
REMIC			
Farm income or (loss)			
Taxable social security benefits and unemployment compensation			
Other income			
Total income	458,995.	479,933.	-20,938.
Adjustments to Gross Income			
Educator expenses			
Certain business expenses of reservists			
Health savings account deduction			
Moving expenses			
One-half of self-employment tax			
Self-employed SEP, SIMPLE, and qualified plans			
Self-employed health insurance deduction			
Penalty on early withdrawal of savings			
Alimony paid			
IRA deduction	5,788.	4,000.	1,788.
Student loan interest deduction			
Tuition and fees deduction			
Domestic production activities deduction			
Other adjustments			
Total adjustments	5,788.	4,000.	1,788.
Adjusted Gross Income	453,207.	475,933.	-22,726.

ANDREW COHEN & RITA COHEN

Two Year Comparison**2007 to 2006**

Description	2007	2006	Difference
Itemized Deductions			
Medical and dental	NONE	NONE	NONE
Taxes	38,985.	22,021.	16,964.
Interest	4,570.	3,221.	1,349.
Contributions	2,390.	5,090.	-2,700.
Casualty or theft losses			
Miscellaneous deductions	3,975.	NONE	3,975.
Less: Itemized deduction phaseout	5,936.	6,509.	-573.
Total itemized deductions	43,984.	23,823.	20,161.
Standard deduction			
Total exemptions	13,600.	13,200.	400.
Plus: Phase-out	9,068.	8,800.	268.
Taxable income	404,691.	447,710.	-43,019.
Tax Liability			
Gross income tax	98,417.	125,084.	-26,667.
Alternative Minimum Tax	10,540.	NONE	10,540.
Additional taxes			
Less: Tax credits		6.	-6.
Balance	108,957.	125,078.	-16,121.
Plus: Other taxes			
Total tax liability	108,957.	125,078.	-16,121.
Less: Withholding	1.	77.	-76.
Estimated tax and other payments	140,000.	93,000.	47,000.
Plus: Penalties and interest		1,363.	-1,363.
Balance due (overpayment)	-31,044.	33,364.	-64,408.
Effective tax rate	24.0%	26.3%	

Marginal Tax Planning Calculation

Filing status	MFJ
Current tax rate	35.00%
Marginal rate (next highest bracket)	%
Upper income limit of current tax rate	349,700.
Taxable income	404,691.
Unused amount (upper limit-taxable income)	

Note: This can be used to determine how much income is available until the next higher tax rate. It is based upon the 1040 tax tables without regard to phaseouts, the AMT tax rate or capital gains tax rate.

Record of Estimated Tax Payments (Farmers, fishermen, and fiscal year taxpayers, see pages 2 and 3 for payment due dates.)

Payment number	Payment due date	(a) Amount due	(b) Date paid	(c) Check or money order number or credit card confirmation number	(d) Amount paid (do not include any credit card convenience fee)	(e) 2007 overpayment credit applied	(f) Total amount paid and credited (add (d) and (e))
1	4/15/2008		04/15/08				
2	6/16/2008		06/16/08				
3	9/15/2008		09/15/08				
4	1/15/2009*		01/15/09				
Total				▶			

* You do not have to make this payment if you file your 2008 tax return by February 2, 2009, and pay the entire balance due with your return.

Tear off here

Form **1040-ES**
Department of the Treasury
Internal Revenue Service

2008 Estimated Tax

Payment
Voucher **4**

OMB No. 1545-0074

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the "United States Treasury." Write your social security number and "2008 Form 1040-ES" on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Calendar year - Due Jan. 15, 2009

Amount of estimated tax you are paying
by check or money order.

Dollars Cents

Print or type	Your first name and initial ANDREW	Your last name COHEN	Your social security number [REDACTED]
	If joint payment, complete for spouse		
	Spouse's first name and initial RITA	Spouse's last name COHEN	Spouse's social security number [REDACTED]
	Address (number, street, and apt. no.) 3750 JEFFERSON BOULEVARD		
	City, state, and ZIP code. (If a foreign address, enter city, province or state, postal code, and country.) VIRGINIA BEACH, VA 23455		

For Privacy Act and Paperwork Reduction Act Notice, see instructions above.

Form **1040-ES**
Department of the Treasury
Internal Revenue Service**2008 Estimated Tax**Payment
Voucher **3**

OMB No. 1545-0074

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the "United States Treasury." Write your social security number and "2008 Form 1040-ES" on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Calendar year - Due Sept. 15, 2008

Amount of estimated tax you are paying
by check or money order.

Dollars

Cents

Print or type	Your first name and initial ANDREW	Your last name COHEN	Your social security number [REDACTED]
	If joint payment, complete for spouse		
	Spouse's first name and initial RITA	Spouse's last name COHEN	Spouse's social security number [REDACTED]
	Address (number, street, and apt. no.) 3750 JEFFERSON BOULEVARD		
	City, state, and ZIP code. (If a foreign address, enter city, province or state, postal code, and country.) VIRGINIA BEACH, VA 23455		

For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 5.

Tear off here

Form **1040-ES**
Department of the Treasury
Internal Revenue Service**2008 Estimated Tax**Payment
Voucher **2**

OMB No. 1545-0074

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the "United States Treasury." Write your social security number and "2008 Form 1040-ES" on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Calendar year - Due June 16, 2008

Amount of estimated tax you are paying
by check or money order.

Dollars

Cents

Print or type	Your first name and initial ANDREW	Your last name COHEN	Your social security number [REDACTED]
	If joint payment, complete for spouse		
	Spouse's first name and initial RITA	Spouse's last name COHEN	Spouse's social security number [REDACTED]
	Address (number, street, and apt. no.) 3750 JEFFERSON BOULEVARD		
	City, state, and ZIP code. (If a foreign address, enter city, province or state, postal code, and country.) VIRGINIA BEACH, VA 23455		

For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 5.

Tear off here

Form **1040-ES**
Department of the Treasury
Internal Revenue Service**2008 Estimated Tax**Payment
Voucher **1**

OMB No. 1545-0074

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the "United States Treasury." Write your social security number and "2008 Form 1040-ES" on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Calendar year - Due April 15, 2008

Amount of estimated tax you are paying
by check or money order.

Dollars

Cents

Print or type	Your first name and initial ANDREW	Your last name COHEN	Your social security number [REDACTED]
	If joint payment, complete for spouse		
	Spouse's first name and initial RITA	Spouse's last name COHEN	Spouse's social security number [REDACTED]
	Address (number, street, and apt. no.) 3750 JEFFERSON BOULEVARD		
	City, state, and ZIP code. (If a foreign address, enter city, province or state, postal code, and country.) VIRGINIA BEACH, VA 23455		

For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 5.

Form **1040**

Department of the Treasury - Internal Revenue Service

U.S. Individual Income Tax Return **2007**

IRS Use Only - Do not write or staple in this space.

Label

(See instructions on page 12.)

Use the IRS label.

Otherwise, please print or type.

For the year Jan. 1-Dec. 31, 2007, or other tax year beginning , 2007, ending		OMB No. 1545-0074
L Your first name and initial A ANDREW	L Last name COHEN	Your social security number [REDACTED]
B If a joint return, spouse's first name and initial RITA	L Last name COHEN	Spouse's social security number [REDACTED]
H Home address (number and street). If you have a P.O. box, see page 12. 3750 JEFFERSON BOULEVARD		You must enter your SSN(s) above.
E City, town or post office, state, and ZIP code. If you have a foreign address, see page 12. VIRGINIA BEACH VA 23455		Checking a box below will not change your tax or refund.
Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 12) <input type="checkbox"/> You <input type="checkbox"/> Spouse		

Filing Status

Check only one box.

- 1 ☐ Single 4 ☐ Head of household (with qualifying person). (See page 13.) If the qualifying person is a child but not your dependent, enter this child's name here. ☐
- 2 ☒ Married filing jointly (even if only one had income)
- 3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ☐
- 5 ☐ Qualifying widow(er) with dependent child (see page 14)

Exemptions

If more than four dependents, see page 15.

- 6a ☒ **Yourself.** If someone can claim you as a dependent, **do not** check box 6a } **Boxes checked on 6a and 6b** 2
- b ☒ **Spouse** } **No. of children on 6c who:**
- c **Dependents:**
- | (1) First name | Last name | (2) Dependent's social security number | (3) Dependent's relationship to you | (4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see page 15) |
|----------------|-----------|--|-------------------------------------|--|
| CHLOE J. | COHEN | [REDACTED] | CHILD | X |
| ORION K. | COHEN | [REDACTED] | CHILD | X |
- Dependents on 6c not entered above**
- Add numbers on lines above** **4**

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see page 19.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

- | | | | | |
|-----|---|-----------|--------------------------------|----------|
| 7 | Wages, salaries, tips, etc. Attach Form(s) W-2 | STMT 1 | 7 | 5,788. |
| 8a | Taxable interest. Attach Schedule B if required | | 8a | 2,580. |
| b | Tax-exempt interest. Do not include on line 8a | 8b | | |
| 9a | Ordinary dividends. Attach Schedule B if required | | 9a | 43,383. |
| b | Qualified dividends (see page 19) | STMT 2 9b | | 7,126. |
| 10 | Taxable refunds, credits, or offsets of state and local income taxes (see page 20) | | 10 | 3,731. |
| 11 | Alimony received | | 11 | |
| 12 | Business income or (loss). Attach Schedule C or C-EZ | | 12 | -8,428. |
| 13 | Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/> | | 13 | 411,996. |
| 14 | Other gains or (losses). Attach Form 4797 | | 14 | |
| 15a | IRA distributions | 15a | b Taxable amount (see page 21) | 15b |
| 16a | Pensions and annuities | 16a | b Taxable amount (see page 22) | 16b |
| 17 | Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E | | 17 | -55. |
| 18 | Farm income or (loss). Attach Schedule F | | 18 | |
| 19 | Unemployment compensation | | 19 | |
| 20a | Social security benefits | 20a | b Taxable amount (see page 24) | 20b |
| 21 | Other income. List type and amount (see page 24) | | 21 | |
| 22 | Add the amounts in the far right column for lines 7 through 21. This is your total income | | 22 | 458,995. |

Adjusted Gross Income

- | | | | |
|-----|--|-----|----------|
| 23 | Educator expenses (see page 26) | 23 | |
| 24 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ | 24 | |
| 25 | Health savings account deduction. Attach Form 8889 | 25 | |
| 26 | Moving expenses. Attach Form 3903 | 26 | |
| 27 | One-half of self-employment tax. Attach Schedule SE | 27 | |
| 28 | Self-employed SEP, SIMPLE, and qualified plans | 28 | |
| 29 | Self-employed health insurance deduction (see page 26) | 29 | |
| 30 | Penalty on early withdrawal of savings | 30 | |
| 31a | Alimony paid b Recipient's SSN <input type="checkbox"/> | 31a | |
| 32 | IRA deduction (see page 27) | 32 | 5,788. |
| 33 | Student loan interest deduction (see page 30) | 33 | |
| 34 | Tuition and fees deduction. Attach Form 8917 | 34 | |
| 35 | Domestic production activities deduction. Attach Form 8903 | 35 | |
| 36 | Add lines 23 through 31a and 32 through 35 | 36 | 5,788. |
| 37 | Subtract line 36 from line 22. This is your adjusted gross income | 37 | 453,207. |

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see page 83.

JSA
RS

7A1210 1.000

Form **1040** (2007)

TD5204 2YVG 04/14/2008 21:54:04 V07-5.5 7444

Form 1040 (2007) **ANDREW COHEN & RITA COHEN**Page **2****Tax and Credits****Standard Deduction for -**

● People who checked any box on line 39a or 39b or who can be claimed as a dependent, see page 31.

● All others:

Single or Married filing separately, \$5,350

Married filing jointly or Qualifying widow(er), \$10,700

Head of household, \$7,850

38	Amount from line 37 (adjusted gross income)	38	453,207.
39a	Check <input type="checkbox"/> You were born before January 2, 1943, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a		
	if: <input type="checkbox"/> Spouse was born before January 2, 1943, <input type="checkbox"/> Blind. 39b <input type="checkbox"/>		
b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 31 and check here		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	43,984.
41	Subtract line 40 from line 38	41	409,223.
42	If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemptions claimed on line 6d. If line 38 is over \$117,300, see the worksheet on page 33	42	SEE STMT 3
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	4,532.
44	Tax (see page 33). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> Form(s) 8889	44	404,691.
45	Alternative minimum tax (see page 36). Attach Form 6251	45	98,417.
46	Add lines 44 and 45	46	10,540.
47	Credit for child and dependent care expenses. Attach Form 2441	47	108,957.
48	Credit for the elderly or the disabled. Attach Schedule R	48	
49	Education credits. Attach Form 8863	49	
50	Residential energy credits. Attach Form 5695	50	
51	Foreign tax credit. Attach Form 1116 if required	51	
52	Child tax credit (see page 39). Attach Form 8901 if required	52	
53	Retirement savings contributions credit. Attach Form 8880	53	
54	Credits from: a <input type="checkbox"/> Form 8396 b <input type="checkbox"/> Form 8859 c <input type="checkbox"/> Form 8839	54	
55	Other credits: a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Form	55	
56	Add lines 47 through 55. These are your total credits	56	
57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0-	57	108,957.

Other Taxes

58	Self-employment tax. Attach Schedule SE	58	
59	Unreported social security and Medicare tax from: a <input type="checkbox"/> Form 4137 b <input type="checkbox"/> Form 8919	59	
60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60	
61	Advance earned income credit payments from Form(s) W-2, box 9	61	
62	Household employment taxes. Attach Schedule H	62	
63	Add lines 57 through 62. This is your total tax	63	108,957.

Payments

If you have a qualifying child, attach Schedule EIC.

64	Federal income tax withheld from Forms W-2 and 1099	64	1.
65	2007 estimated tax payments and amount applied from 2006 return	65	140,000.
66a	Earned income credit (EIC)	66a	
b	Nontaxable combat pay election 66b		
67	Excess social security and tier 1 RRTA tax withheld (see page 59)	67	
68	Additional child tax credit. Attach Form 8812	68	
69	Amount paid with request for extension to file (see page 59)	69	
70	Payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885	70	
71	Refundable credit for prior year minimum tax from Form 8801, line 27	71	
72	Add lines 64, 65, 66a, and 67 through 71. These are your total payments	72	140,001.

Refund

Direct deposit? See page 59 and fill in 74b, 74c, and 74d, or Form 8888.

73	If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you overpaid	73	31,044.
74a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here	74a	
b	Routing number	c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
d	Account number		
75	Amount of line 73 you want applied to your 2008 estimated tax	75	31,044.

Amount You Owe

76	Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 60	76	
77	Estimated tax penalty (see page 61)	77	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 61)? ☒ Yes. Complete the following. ☐ No

Designee's name PREPARER	Phone no.	Personal identification number (PIN)
---------------------------------	-----------	--------------------------------------

Sign Here

Joint return? See page 13. Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	Daytime phone number
Spouse's signature. If a joint return, both must sign.	Date	INVESTOR / TRAINER Spouse's occupation	
		SINGER	

Preparer's Use Only

Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code	MCPHILLIPS, ROBERTS & DEANS, PLC 150 BOUSH STREET, SUITE 1100 NORFOLK VA 23510		EIN 757-640-7190

SCHEDULES A&B
(Form 1040)Department of the Treasury
Internal Revenue Service (99)**Schedule A - Itemized Deductions**

(Schedule B is on back)

OMB No. 1545-0074

2007Attachment
Sequence No. **07**▶ **Attach to Form 1040.** ▶ **See Instructions for Schedules A&B (Form 1040).**

Name(s) shown on Form 1040

Your social security number

ANDREW COHEN & RITA COHEN

Medical and Dental Expenses**Caution.** Do not include expenses reimbursed or paid by others.

- 1 Medical and dental expenses (see page A-1) STMT 4
- 2 Enter amount from Form 1040, line 38 2 453,207.
- 3 Multiply line 2 by 7.5% (.075) 3 33,991.
- 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- 4

19,047.

33,991.

NONE

Taxes You Paid

(See page A-2.)

5 State and local (check only one box):

a ☒ Income taxes, orb ☐ General sales taxes

6 Real estate taxes (see page A-5)

7 Personal property taxes STMT 4

8 Other taxes. List type and amount ▶

9 Add lines 5 through 8

33,484.

5,190.

311.

38,985.

Interest You Paid

(See page A-5.)

- 10 Home mortgage interest and points reported to you on Form 1098
- 11 Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see page A-6 and show that person's name, identifying no., and address ▶

SEE STATEMENT 4

12 Points not reported to you on Form 1098. See page A-6 for special rules

13 Qualified mortgage insurance premiums (See page A-7)

14 Investment interest. Attach Form 4952 if required. (See page A-7.) SEE STATEMENT 4

15 Add lines 10 through 14

4,500.

70.

4,570.

Gifts to Charity

If you made a gift and got a benefit for it, see page A-8.

16 Gifts by cash or check. If you made any gift of \$250 or more, see page A-8. SEE STATEMENT 517 Other than by cash or check. If any gift of \$250 or more, see page A-8. You **must** attach Form 8283 if over \$500

18 Carryover from prior year

19 Add lines 16 through 18

1,910.

480.

STMT 5

2,390.

Casualty and Theft Losses

20 Casualty or theft loss(es). Attach Form 4684. (See page A-9.)

Job Expenses and Certain Miscellaneous Deductions

(See page A-9.)

21 Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See page A-9.) ▶

22 Tax preparation fees

23 Other expenses - investment, safe deposit box, etc. List type and amount ▶ SEE STATEMENT 524 Add lines 21 through 23
Enter amount from Form 1040, line 38 25 453,207.

26 Multiply line 25 by 2% (.02)

27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-

1,340.

3,810.

5,150.

9,064.

NONE

Other Miscellaneous Deductions28 Other - from list on page A-10. List type and amount ▶ SEE STATEMENT 6

3,975.

Total Itemized Deductions

29 Is Form 1040, line 38, over \$156,400 (over \$78,200 if married filing separately)?

☐ **No.** Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40.

☒ **Yes.** Your deduction may be limited. See page A-10 for the amount to enter.

30 If you elect to itemize deductions even though they are less than your standard deduction, check here ▶ ☐

SEE STMT 7

43,984.

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule A (Form 1040) 2007

Name(s) shown on Form 1040. Do not enter name and social security number if shown on other side.

Your social security number

ANDREW COHEN & RITA COHEN

Schedule B - Interest and Ordinary Dividends

Attachment
Sequence No. 08Part I
Interest(See page B-1
and the
instructions for
Form 1040,
line 8a.)**1** List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see page B-1 and list this interest first. Also, show that buyer's social security number and address ▶

J BANK OF AMERICA

J INTEREST INCOME FROM WINTERGREEN

T AMERITRADE

T VIANIX LC

T ENVEST II LLC

Amount

626.

11.

65.

716.

1,162.

1

Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.**2** Add the amounts on line 1**3** Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815**4** Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a ▶**Note.** If line 4 is over \$1,500, you must complete Part III.

2,580.

2

3

2,580.

4

Amount

Part II
Ordinary
Dividends(See page B-1
and the
instructions for
Form 1040,
line 9a.)**5** List name of payer ▶

T BERNARD L. MADOFF

T VANGUARD - INTL STOCK INDEX

T VANGUARD - STOCK MKT IDX ADM

T AMERITRADE

34,632.

1,998.

3,939.

2,814.

5

Note. If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.**6** Add the amounts on line 5. Enter the total here and on Form 1040, line 9a ▶**Note.** If line 6 is over \$1,500, you must complete Part III.

43,383.

6

Part III
Foreign
Accounts
and Trusts(See
page B-2.)

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; or (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

Yes No

7a At any time during 2007, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions and filing requirements for Form TD F 90-22.1**b** If "Yes," enter the name of the foreign country ▶**8** During 2007, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See page B-2

X

X

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule B (Form 1040) 2007

**SCHEDULE C
(Form 1040)****Profit or Loss From Business**

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

OMB No. 1545-0074

2007Attachment
Sequence No. **09**Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040NR, or 1041.

▶ See Instructions for Schedule C (Form 1040).

Name of proprietor

RITA COHEN

Social security number (SSN)

A Principal business or profession, including product or service (see page C-2 of the instructions)**B** Enter code from pages C-8, 9, & 10

INDEPENDENT ARTISTS, WRITERS, PERFORMERS

711510

C Business name. If no separate business name, leave blank.**D** Employer ID number (EIN), if any

RITA A. COHEN

E Business address (including suite or room no.) ▶ 3750 JEFFERSON BLVD.

City, town or post office, state, and ZIP code VIRGINIA BEACH, VA 23455

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶**G** Did you "materially participate" in the operation of this business during 2007? If "No," see page C-3 for limit on losses☒ Yes☐ No**H** If you started or acquired this business during 2007, check here**Part I Income**

1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here	STMT. 8. ▶ <input type="checkbox"/>	1	2,400.
2 Returns and allowances		2	
3 Subtract line 2 from line 1		3	2,400.
4 Cost of goods sold (from line 42 on page 2)		4	
5 Gross profit. Subtract line 4 from line 3		5	2,400.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3)		6	
7 Gross income. Add lines 5 and 6		7	2,400.

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8 Advertising	8	150.	18 Office expense	18	
9 Car and truck expenses (see page C-4) . . . STMT. 8. . . .	9	1,285.	19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see page C-5):		
11 Contract labor (see page C-4)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-4)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	397.
15 Insurance (other than health)	15		23 Taxes and licenses	23	
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	1,075.
b Other	16b		b Deductible meals and entertainment (see page C-6)	24b	340.
17 Legal and professional services	17		25 Utilities	25	
			26 Wages (less employment credits)	26	
			27 Other expenses (from line 48 on page 2)	27	3,699.

28 **Total expenses** before expenses for business use of home. Add lines 8 through 27 in columns**29** Tentative profit (loss). Subtract line 28 from line 7**30** Expenses for business use of your home. Attach **Form 8829****31** **Net profit or (loss).** Subtract line 30 from line 29.

- If a profit, enter on both **Form 1040, line 12,** and **Schedule SE, line 2,** or on **Form 1040 NR, line 13** (statutory employees, see page C-7). Estates and trusts, enter on Form 1041, line 3.

- If a loss, you **must** go to line 32.

32 If you have a loss, check the box that describes your investment in this activity (see page C-7).

- If you checked 32a, enter the loss on both **Form 1040, line 12,** and **Schedule SE, line 2,** or on **Form 1040NR, line 13** (statutory employees, see page C-7). Estates and trusts, enter on Form 1041, line 3.

- If you checked 32b, you **must** attach **Form 6198.** Your loss may be limited.

28 6,946.**29** -4,546.**30****31** -4,546.**31** -4,546.**32a** ☒ All investment is at risk.**32b** ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see page C-8 of the instructions.

Schedule C (Form 1040) 2007

Part III Cost of Goods Sold (see page C-7)

33	Method(s) used to value closing inventory:	a <input type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation <input type="checkbox"/> Yes <input type="checkbox"/> No			
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4			42

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file Form 4562.

43	When did you place your vehicle in service for business purposes? (month, day, year) ►	
44	Of the total number of miles you drove your vehicle during 2007, enter the number of miles you used your vehicle for:	
	a Business	b Commuting (see instructions)
	c Other	
45	Do you (or your spouse) have another vehicle available for personal use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
46	Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
47 a	Do you have evidence to support your deduction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," is the evidence written?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

AUDITION EXPENSES	50.
VOICE TRAINING	1,690.
SHEET MUSIC	113.
COSTUMES	485.
MAKE UP AND HAIR	814.
PIANO ACCOMPANIEST	290.
PIANO TUNING	175.
PROFESSIONAL MAGAZINES, JOURNALS	82.
48 Total other expenses. Enter here and on page 1, line 27	3,699.

**SCHEDULE C
(Form 1040)****Profit or Loss From Business**

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

OMB No. 1545-0074

2007Attachment
Sequence No. **09**Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040NR, or 1041.

▶ See Instructions for Schedule C (Form 1040).

Name of proprietor

ANDREW COHEN

Social security number (SSN)

A Principal business or profession, including product or service (see page C-2 of the instructions)**B** Enter code from pages C-8, 9, & 10

ALL OTHER PERSONAL SERVICES

812990

C Business name. If no separate business name, leave blank.**D** Employer ID number (EIN), if any**PERSONAL TRAINING****E** Business address (including suite or room no.) ▶ 3750 JEFFERSON BLVD

City, town or post office, state, and ZIP code VIRGINIA BEACH, VA 23455

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶**G** Did you "materially participate" in the operation of this business during 2007? If "No," see page C-3 for limit on losses☒ Yes☐ No**H** If you started or acquired this business during 2007, check here☒**Part I Income**

1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here	STMT. 9. ▶ <input type="checkbox"/>	1	2,055.
2 Returns and allowances		2	
3 Subtract line 2 from line 1		3	2,055.
4 Cost of goods sold (from line 42 on page 2)		4	
5 Gross profit. Subtract line 4 from line 3		5	2,055.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3)		6	
7 Gross income. Add lines 5 and 6		7	2,055.

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8 Advertising	8		18 Office expense	18	
9 Car and truck expenses (see page C-4) . . . STMT. 9. . . .	9	1,213.	19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see page C-5):		
11 Contract labor (see page C-4)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-4)	13	177.	21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15	172.	23 Taxes and licenses	23	
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b		b Deductible meals and entertainment (see page C-6)	24b	
17 Legal and professional services	17		25 Utilities	25	
			26 Wages (less employment credits)	26	
			27 Other expenses (from line 48 on page 2)	27	4,375.

28 **Total expenses** before expenses for business use of home. Add lines 8 through 27 in columns

28 5,937.

29 Tentative profit (loss). Subtract line 28 from line 7

29 -3,882.

30 Expenses for business use of your home. Attach **Form 8829**

30

31 **Net profit or (loss).** Subtract line 30 from line 29.

- If a profit, enter on both **Form 1040, line 12,** and **Schedule SE, line 2,** or on **Form 1040 NR, line 13** (statutory employees, see page C-7). Estates and trusts, enter on Form 1041, line 3.

- If a loss, you **must** go to line 32.

32 If you have a loss, check the box that describes your investment in this activity (see page C-7).

- If you checked 32a, enter the loss on both **Form 1040, line 12,** and **Schedule SE, line 2,** or on **Form 1040NR, line 13** (statutory employees, see page C-7). Estates and trusts, enter on Form 1041, line 3.
- If you checked 32b, you **must** attach **Form 6198.** Your loss may be limited.

32a ☒ All investment is at risk.
32b ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see page C-8 of the instructions.

Schedule C (Form 1040) 2007

Part III Cost of Goods Sold (see page C-7)

33	Method(s) used to value closing inventory:	a <input type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation <input type="checkbox"/> Yes <input type="checkbox"/> No			
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4			42

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file Form 4562.

43	When did you place your vehicle in service for business purposes? (month, day, year) ▶	
44	Of the total number of miles you drove your vehicle during 2007, enter the number of miles you used your vehicle for:	
	a Business	b Commuting (see instructions)
	c Other	
45	Do you (or your spouse) have another vehicle available for personal use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
46	Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
47 a	Do you have evidence to support your deduction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," is the evidence written?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

EDUCATION	869.
UNIFORMS	287.
CERTIFICATION	1,709.
BELT TESTING	1,510.
48 Total other expenses. Enter here and on page 1, line 27	4,375.

**SCHEDULE D
(Form 1040)**Department of the Treasury
Internal Revenue Service**Capital Gains and Losses**

▶ Attach to Form 1040 or Form 1040NR.

▶ See Instructions for Schedule D (Form 1040).

▶ Use Schedule D-1 to list additional transactions for lines 1 and 8.

OMB No. 1545-0074

2007
Attachment
Sequence No. **12**

Name(s) shown on return

Your social security number

ANDREW COHEN & RITA COHEN**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price (see page D-7 of the instructions)	(e) Cost or other basis (see page D-7 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
1 BERNARD L. MADOFF	VAR	VAR	33,601,518.	33,282,207.	319,311.
VARIOUS AMERITRADE A/C #1722 SHORT TERM	VAR	VAR	183,607.	163,490.	20,117.
2 Enter your short-term totals, if any, from Schedule D-1, line 2	2				
3 Total short-term sales price amounts. Add lines 1 and 2 in column (d)	3		33,785,125.		
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824	4				
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1	5				
6 Short-term capital loss carryover. Enter the amount, if any, from line 10 of your Capital Loss Carryover Worksheet on page D-7 of the instructions	6				()
7 Net short-term capital gain or (loss). Combine lines 1 through 6 in column (f)	7				339,428.

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price (see page D-7 of the instructions)	(e) Cost or other basis (see page D-7 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
8 VARIOUS AMERITRADE A/C #1722 LONG TERM	VAR	VAR	108,428.	90,457.	17,971.
9 Enter your long-term totals, if any, from Schedule D-1, line 9	9				
10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)	10		108,428.		
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824	11				55.
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1	12				53,949.
13 Capital gain distributions. See page D-2 of the instructions	13				593.
14 Long-term capital loss carryover. Enter the amount, if any, from line 15 of your Capital Loss Carryover Worksheet on page D-7 of the instructions	14				()
15 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (f). Then go to Part III on the back	15				72,568.

For Paperwork Reduction Act Notice, see Form 1040 or Form 1040NR instructions.

Schedule D (Form 1040) 2007

Part III Summary

16	Combine lines 7 and 15 and enter the result.	16	411,996.
If line 16 is: • A gain , enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below. • A loss , skip lines 17 through 20 below. then go to line 21. Also be sure to complete line 22. • Zero , skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22.			
17	Are lines 15 and 16 both gains? <input checked="" type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.		
18	Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet on page D-8 of the instructions ▶	18	
19	Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet on page D-9 of the instructions ▶	19	139.
20	Are lines 18 and 19 both zero or blank? <input type="checkbox"/> Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 35 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). Do not complete lines 21 and 22 below. <input checked="" type="checkbox"/> No. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Schedule D Tax Worksheet on page D-10 of the instructions. Do not complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of: • The loss on line 16 or • (\$3,000), or if married filing separately, (\$1,500) }	21	()
Note. When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b? <input type="checkbox"/> Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 35 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). <input type="checkbox"/> No. Complete the rest of Form 1040 or Form 1040NR.		

Complete this worksheet only if line 18 or line 19 of Schedule D is more than zero. Otherwise, complete the Qualified Dividends and Capital Gain Tax Worksheet on page 35 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR) to figure your tax.

Exception: Do not use the Qualified Dividends and Capital Gain Tax Worksheet or this worksheet to figure your tax if:

- Line 15 or line 16 of Schedule D is zero or less and you have no qualified dividends on Form 1040, line 9b (or Form 1040NR, line 10b); or
- Form 1040, line 43 (or Form 1040NR, line 40) is zero or less.

Instead, see the instructions for Form 1040, line 44 (or Form 1040NR, line 41).

1. Enter your taxable income from Form 1040, line 43 (or Form 1040NR, line 40)	1.	404,691.
2. Enter your qualified dividends from Form 1040, line 9b (or Form 1040NR, line 10b)	2.	7,126.
3. Enter the amount from Form 4952 (used to figure investment interest expense deduction), line 4g	3.	NONE
4. Enter the amount from Form 4952, line 4e*	4.	72,513.
5. Subtract line 4 from line 3. If zero or less, enter -0-	5.	
6. Subtract line 5 from line 2. If zero or less, enter -0-	6.	7,126.
7. Enter the smaller of line 15 or line 16 of Schedule D	7.	72,568.
8. Enter the smaller of line 3 or line 4	8.	NONE
9. Subtract line 8 from line 7. If zero or less, enter -0-	9.	72,568.
10. Add lines 6 and 9	10.	79,694.
11. Add lines 18 and 19 of Schedule D	11.	139.
12. Enter the smaller of line 9 or line 11	12.	139.
13. Subtract line 12 from line 10	13.	79,555.
14. Subtract line 13 from line 1. If zero or less, enter -0-	14.	325,136.
15. Enter the smaller of: • The amount on line 1 or • \$31,850 if single or married filing separately; \$63,700 if married filing jointly or qualifying widow(er); or \$42,650 if head of household	15.	63,700.
16. Enter the smaller of line 14 or line 15	16.	63,700.
17. Subtract line 10 from line 1. If zero or less, enter -0-	17.	324,997.
18. Enter the larger of line 16 or line 17	18.	324,997.
If lines 15 and 16 are the same, skip lines 19 and 20 and go to line 21. Otherwise, go to line 19.		
19. Subtract line 16 from line 15	19.	
20. Multiply line 19 by 5% (.05)	20.	
If lines 1 and 15 are the same, skip lines 21 through 33 and go to line 34. Otherwise, go to line 21.		
21. Enter the smaller of line 1 or line 13	21.	79,555.
22. Enter the amount from line 19 (if line 19 is blank, enter -0-)	22.	
23. Subtract line 22 from line 21. If zero or less, enter -0-	23.	79,555.
24. Multiply line 23 by 15% (.15)	24.	11,933.
If Schedule D, line 19, is zero or blank, skip lines 25 through 30 and go to line 31. Otherwise, go to line 25.		
25. Enter the smaller of line 9 above or Schedule D, line 19	25.	139.
26. Add lines 10 and 18	26.	404,691.
27. Enter the amount from line 1 above	27.	404,691.
28. Subtract line 27 from line 26. If zero or less, enter -0-	28.	
29. Subtract line 28 from line 25. If zero or less, enter -0-	29.	139.
30. Multiply line 29 by 25% (.25)	30.	35.
If Schedule D, line 18, is zero or blank, skip lines 31 through 33 and go to line 34. Otherwise, go to line 31.		
31. Add lines 18, 19, 23, and 29	31.	
32. Subtract line 31 from line 1	32.	
33. Multiply line 32 by 28% (.28)	33.	
34. Figure the tax on the amount on line 18. Use the Tax Table or Tax Computation Worksheet, whichever applies	34.	86,449.
35. Add lines 20, 24, 30, 33, and 34	35.	98,417.
36. Figure the tax on the amount on line 1. Use the Tax Table or Tax Computation Worksheet, whichever applies	36.	113,848.
37. Tax on all taxable income (including capital gains and qualified dividends). Enter the smaller of line 35 or line 36. Also include this amount on Form 1040, line 44 (or Form 1040NR, line 41)	37.	98,417.

*If applicable, enter instead the smaller amount you entered on the dotted line next to line 4e of Form 4952.

If you are not reporting a gain on Form 4797, line 7, skip lines 1 through 9 and go to line 10.

1.	If you have a section 1250 property in Part III of Form 4797 for which you made an entry in Part I of Form 4797 (but not on Form 6252), enter the smaller of line 22 or line 24 of Form 4797 for that property. If you did not have any such property, go to line 4. If you had more than one such property, see instructions	1.	
2.	Enter the amount from Form 4797, line 26g, for the property for which you made an entry on line 1	2.	
3.	Subtract line 2 from line 1	3.	
4.	Enter the total unrecaptured section 1250 gain included on line 26 or line 37 of Form(s) 6252 from installment sales of trade or business property held more than 1 year (see instructions)	4.	
5.	Enter the total of any amounts reported to you on a Schedule K-1 from a partnership or an S corporation as "unrecaptured section 1250 gain"	5.	
6.	Add lines 3 through 5	6.	
7.	Enter the smaller of line 6 or the gain from Form 4797, line 7	7.	
8.	Enter the amount, if any, from Form 4797, line 8	8.	
9.	Subtract line 8 from line 7. If zero or less, enter -0-	9.	
10.	Enter the amount of any gain from the sale or exchange of an interest in a partnership attributable to unrecaptured section 1250 gain (see instructions)	10.	
11.	Enter the total of any amounts reported to you on a Schedule K-1, Form 1099-DIV, or Form 2439 as "unrecaptured section 1250 gain" from an estate, trust, real estate investment trust, or mutual fund (or other regulated investment company)	11.	139.
12.	Enter the total of any unrecaptured section 1250 gain from sales (including installment sales) or other dispositions of section 1250 property held more than 1 year for which you did not make an entry in Part I of Form 4797 for the year of sale (see instructions)	12.	
13.	Add lines 9 through 12	13.	139.
14.	If you had any section 1202 gain or collectibles gain or (loss), enter the total of lines 1 through 4 of the 28% Rate Gain Worksheet on page D-7. Otherwise, enter -0-	14.	
15.	Enter the (loss), if any, from Schedule D, line 7. If Schedule D, line 7, is zero or a gain, enter -0-	15.	()
16.	Enter your long-term capital loss carryovers from Schedule D, line 14, and Schedule K-1 (Form 1041), box 11, code C	16.	()
17.	Combine lines 14 through 16. If the result is a (loss), enter it as a positive amount. If the result is zero or a gain, enter -0-	17.	
18.	Unrecaptured section 1250 gain. Subtract line 17 from line 13. If zero or less, enter -0-. If more than zero, enter the result here and on Schedule D, line 19	18.	139.

**SCHEDULE E
(Form 1040)**Department of the Treasury
Internal Revenue Service (99)**Supplemental Income and Loss**
(From rental real estate, royalties, partnerships,
S corporations, estates, trusts, REMICs, etc.)

OMB No. 1545-0074

2007Attachment
Sequence No. **13**

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ See Instructions for Schedule E (Form 1040).

Name(s) shown on return

Your social security number

ANDREW COHEN & RITA COHEN

Part I Income or Loss From Rental Real Estate and Royalties Note. If you are in the business of renting personal property, use Schedule C or C-EZ (see page E-3). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

1	List the type and location of each rental real estate property:	2	For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of:	Yes	No
A	-----	<ul style="list-style-type: none"> • 14 days or • 10% of the total days rented at fair rental value? (See page E-3)	A		
B	-----		B		
C	-----		C		

Income:

		Properties			Totals
		A	B	C	(Add columns A, B, and C.)
3	Rents received	3			3
4	Royalties received	4			4
Expenses:					
5	Advertising	5			
6	Auto and travel (see page E-4) . . .	6			
7	Cleaning and maintenance	7			
8	Commissions	8			
9	Insurance	9			
10	Legal and other professional fees . .	10			
11	Management fees	11			
12	Mortgage interest paid to banks, etc. (see page E-4)	12			12
13	Other interest	13			
14	Repairs	14			
15	Supplies	15			
16	Taxes	16			
17	Utilities	17			
18	Other (list) ▶ ----- ----- -----	18			
19	Add lines 5 through 18	19			19
20	Depreciation expense or depletion (see page E-5)	20			20
21	Total expenses. Add lines 19 and 20	21			
22	Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-5 to find out if you must file Form 6198	22			
23	Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may be limited. See page E-5 to find out if you must file Form 8582. Real estate professionals must complete line 43 on page 2	23	()	()	()
24	Income. Add positive amounts shown on line 22. Do not include any losses	24			
25	Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here	25			()
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 . . .	26			

For Paperwork Reduction Act Notice, see page E-7 of the instructions.

Schedule E (Form 1040) 2007

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Your social security number

ANDREW COHEN & RITA COHEN

Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.**Part II Income or Loss From Partnerships and S Corporations** **Note.** If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (e) on line 28 and attach Form 6198. See page E-1.

- 27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? ☐ Yes ☒ No
If you answered "Yes," see page E-6 before completing this section.

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A	VIANIX LC	P			
B	ENVEST II LLC	P			
C					
D					

STMT 12 Passive Income and Loss

	(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1
A		NONE			
B	55.				
C					
D					
29a Totals		NONE			
b Totals	55.				

- 30 Add columns (g) and (j) of line 29a 30 NONE
31 Add columns (f), (h), and (i) of line 29b 31 (55.)
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below 32 -55.

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer identification number
A		
B		

Passive Income and Loss**Nonpassive Income and Loss**

	(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A				
B				
34a Totals				
b Totals				
35 Add columns (d) and (f) of line 34a 35				
36 Add columns (c) and (e) of line 34b 36 ()				
37 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below 37				

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see page E-7)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below 39					

Part V Summary

40 Net farm rental income or (loss) from Form 4835. Also, complete line 42 below 40	
41 Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18 41	-55.
42 Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code T; and Schedule K-1 (Form 1041), line 14, code F (see page E-7) 42	
43 Reconciliation for real estate professionals. If you were a real estate professional (see page E-2), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules 43	

Form **3800**
Department of the Treasury
Internal Revenue Service (99)**General Business Credit**

- ▶ See separate instructions.
▶ Attach to your tax return.

OMB No. 1545-0895

2007
Attachment
Sequence No. **22**

Name(s) shown on return

ANDREW COHEN & RITA COHEN

Identifying number

Part I Current Year Credit

Important: You may not be required to complete and file a separate credit form (shown in parentheses below) to claim the credit. For details, see the instructions.

1 a Investment credit (attach Form 3468)	1a	
b Welfare-to-work credit (Form 8861)	1b	
c Credit for increasing research activities (Form 6765)	1c	53.
d Low-income housing credit (Form 8586) (enter EIN if claiming this credit from a pass-through entity:)	1d	
e Disabled access credit (Form 8826) (do not enter more than \$5,000)	1e	
f Renewable electricity production credit (Form 8835, Section A only)	1f	
g Indian employment credit (Form 8845)	1g	
h Orphan drug credit (Form 8820)	1h	
i New markets credit (Form 8874) (enter EIN if claiming this credit from a pass-through entity:)	1i	
j Credit for small employer pension plan startup costs (Form 8881) (do not enter more than \$500)	1j	
k Credit for employer-provided child care facilities and services (Form 8882) (enter EIN if claiming this credit from a pass-through entity:)	1k	
l Qualified railroad track maintenance credit (Form 8900)	1l	
m Biodiesel and renewable diesel fuels credit (attach Form 8864)	1m	
n Low sulfur diesel fuel production credit (Form 8896)	1n	
o Distilled spirits credit (Form 8906)	1o	
p Nonconventional source fuel credit (Form 8907)	1p	
q Energy efficient home credit (Form 8908)	1q	
r Energy efficient appliance credit (Form 8909)	1r	
s Alternative motor vehicle credit (Form 8910)	1s	
t Alternative fuel vehicle refueling property credit (Form 8911)	1t	
u Hurricane Katrina housing credit (only from S corporations, partnerships, estates, and cooperatives)	1u	
v Mine rescue team training credit (Form 8923)	1v	
w Credit for contributions to selected community development corporations (Form 8847)	1w	
x General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1x	
2 Add lines 1a through 1x	2	53.
3 Passive activity credits included on line 2 (see instructions)	3	53.
4 Subtract line 3 from line 2	4	
5 Passive activity credits allowed for 2007 (see instructions)	5	
6 Carryforward of general business credit to 2007. See instructions for the schedule to attach	6	
7 Carryback of general business credit from 2008 (see instructions)	7	
8 Current year credit. Add lines 4 through 7	8	NONE

For Paperwork Reduction Act Notice, see separate instructions.

Form **3800** (2007)

Part II Allowable Credit

9	Regular tax before credits:		
	● Individuals. Enter the amount from Form 1040, line 44 or Form 1040NR, line 41	}	9 98,417.
	● Corporations. Enter the amount from Form 1120, Schedule J, line 2; or the applicable line of your return		
	● Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, or the amount from the applicable line of your return		
10	Alternative minimum tax:		
	● Individuals. Enter the amount from Form 6251, line 35	}	10 10,540.
	● Corporations. Enter the amount from Form 4626, line 14		
	● Estates and trusts. Enter the amount from Form 1041, Schedule I, line 56		
11	Add lines 9 and 10		11 108,957.
12 a	Credits from Form 1040, lines 47 through 50 and lines 52 through 54 (or Form 1040NR, lines 44, 45, and 47 through 49)	12a	
b	Foreign tax credit	12b	
c	Credits from Forms 5735 and 8834	12c	
d	Non-business alternative motor vehicle credit (Form 8910, line 18)	12d	
e	Non-business alternative fuel vehicle refueling property credit (Form 8911, line 19)	12e	
f	Add lines 12a through 12e		12f
13	Net income tax. Subtract line 12f from line 11. If zero, skip lines 14 through 17 and enter -0- on line 18		13 108,957.
14	Net regular tax. Subtract line 12f from line 9. If zero or less, enter -0-	14	98,417.
15	Enter 25% (.25) of the excess, if any, of line 14 over \$25,000 (see instructions)	15	18,354.
16	Tentative minimum tax:		
	● Individuals. Enter the amount from Form 6251, line 33	}	16 108,957.
	● Corporations. Enter the amount from Form 4626, line 12		
	● Estates and trusts. Enter the amount from Form 1041, Schedule I, line 54		
17	Enter the greater of line 15 or line 16		17 108,957.
18	Subtract line 17 from line 13. If zero or less, enter -0-		18
19	Credit allowed for the current year. Enter the smaller of line 8 or line 18. Individuals, estates, and trusts: See the instructions for line 19 if claiming the research credit. C corporations: See the line 19 instructions if there has been an ownership change, acquisition, or reorganization. Report the amount from line 19 (if smaller than line 8, see instructions) as indicated below or on the applicable line of your return:		
	● Individuals. Form 1040, line 55 or Form 1040NR, line 50	}	19
	● Corporations. Form 1120, Schedule J, line 5c		
	● Estates and trusts. Form 1041, Schedule G, line 2c		

Form 3800 (2007)

Form

4797Department of the Treasury
Internal Revenue Service (99)**Sales of Business Property**
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

▶ Attach to your tax return.

▶ See separate instructions.

OMB No. 1545-0184

2007Attachment
Sequence No. **27**

Name(s) shown on return

Identifying number

ANDREW COHEN & RITA COHEN

- 1** Enter the gross proceeds from sales or exchanges reported to you for 2007 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions)

1**Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year** (see instructions)

(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
2 SEE STATEMENT 13						55.
3 Gain, if any, from Form 4684, line 39						3
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37						4
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824						5
6 Gain, if any, from line 32, from other than casualty or theft						6
7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows:						7 55.
Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.						
8 Nonrecaptured net section 1231 losses from prior years (see instructions)						8
9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions)						9

Part II Ordinary Gains and Losses(see instructions)

- 10**
- Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

11 Loss, if any, from line 7						11 ()
12 Gain, if any, from line 7 or amount from line 8, if applicable						12
13 Gain, if any, from line 31						13
14 Net gain or (loss) from Form 4684, lines 31 and 38a						14
15 Ordinary gain from installment sales from Form 6252, line 25 or 36						15
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824						16
17 Combine lines 10 through 16						17
18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below:						
a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line 18a." See instructions						18a
b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 14						18b

For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2007)

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255
(see instructions)

19	(a) Description of section 1245, 1250, 1252, 1254, or 1255 property:	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)		
	A				
	B				
	C				
	D				
These columns relate to the properties on lines 19A through 19D. ▶		Property A	Property B	Property C	Property D
20	Gross sales price (Note: See line 1 before completing.)	20			
21	Cost or other basis plus expense of sale	21			
22	Depreciation (or depletion) allowed or allowable	22			
23	Adjusted basis. Subtract line 22 from line 21	23			
24	Total gain. Subtract line 23 from line 20	24			
25	If section 1245 property:				
	a Depreciation allowed or allowable from line 22	25a			
	b Enter the smaller of line 24 or 25a	25b			
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.				
	a Additional depreciation after 1975 (see instructions)	26a			
	b Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	26b			
	c Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e	26c			
	d Additional depreciation after 1969 and before 1976	26d			
	e Enter the smaller of line 26c or 26d	26e			
	f Section 291 amount (corporations only)	26f			
	g Add lines 26b, 26e, and 26f	26g			
27	If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).				
	a Soil, water, and land clearing expenses	27a			
	b Line 27a multiplied by applicable percentage (see instructions)	27b			
	c Enter the smaller of line 24 or 27b	27c			
28	If section 1254 property:				
	a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, and mining exploration costs (see instructions)	28a			
	b Enter the smaller of line 24 or 28a	28b			
29	If section 1255 property:				
	a Applicable percentage of payments excluded from income under section 126 (see instructions)	29a			
	b Enter the smaller of line 24 or 29a (see instructions)	29b			

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30	Total gains for all properties. Add property columns A through D, line 24	30	
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6	32	

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less
(see instructions)

		(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33	
34	Recomputed depreciation (see instructions)	34	
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35	

Form **6198**
Department of the Treasury
Internal Revenue ServicePg. 27 of 103
At-Risk Limitations▶ Attach to your tax return.
▶ See separate instructions.

OMB No. 1545-0712

2007
Attachment
Sequence No. 31

Name(s) shown on return

ANDREW COHEN & RITA COHEN

Identifying number

Description of activity (see page 2 of the instructions)

VIANIX LC

Part I Current Year Profit (Loss) From the Activity, Including Prior Year Nondeductible Amounts
(see page 2 of the instructions).

1	Ordinary income (loss) from the activity (see page 2 of the instructions)	1	-7,858.
2	Gain (loss) from the sale or other disposition of assets used in the activity (or of your interest in the activity) that you are reporting on:		
a	Schedule D	2a	
b	Form 4797	2b	
c	Other form or schedule	2c	
3	Other income and gains from the activity, from Schedule K-1 of Form 1065, Form 1065-B, or Form 1120S, that were not included on lines 1 through 2c	3	716.
4	Other deductions and losses from the activity, including investment interest expense allowed from Form 4952, that were not included on lines 1 through 2c	4	(48)
5	Current year profit (loss) from the activity. Combine lines 1 through 4. See page 3 of the instructions before completing the rest of this form	5	-7,190.

Part II Simplified Computation of Amount At Risk. See page 3 of the instructions before completing this part.

6	Adjusted basis (as defined in section 1011) in the activity (or in your interest in the activity) on the first day of the tax year. Do not enter less than zero	6	19,525.
7	Increases for the tax year (see page 3 of the instructions)	7	
8	Add lines 6 and 7	8	19,525.
9	Decreases for the tax year (see page 4 of the instructions)	9	
10a	Subtract line 9 from line 8	10a	19,525.
b	If line 10a is more than zero, enter that amount here and go to line 20 (or complete Part III). Otherwise, enter -0- and see Pub. 925 for information on the recapture rules	10b	19,525.

Part III Detailed Computation of Amount At Risk. If you completed Part III of Form 6198 for 2006, see page 4 of the instructions.

11	Investment in the activity (or in your interest in the activity) at the effective date. Do not enter less than zero	11	
12	Increases at effective date	12	
13	Add lines 11 and 12	13	
14	Decreases at effective date	14	
15	Amount at risk (check box that applies):		
a	<input type="checkbox"/> At effective date. Subtract line 14 from line 13. Do not enter less than zero.	15	
b	<input type="checkbox"/> From 2006 Form 6198, line 19b. Do not enter the amount from line 10b of the 2006 form.		
16	Increases since (check box that applies):		
a	<input type="checkbox"/> Effective date	b	<input type="checkbox"/> The end of your 2006 tax year
17	Add lines 15 and 16	17	
18	Decreases since (check box that applies):		
a	<input type="checkbox"/> Effective date	b	<input type="checkbox"/> The end of your 2006 tax year
19a	Subtract line 18 from line 17	19a	
b	If line 19a is more than zero, enter that amount here and go to line 20. Otherwise, enter -0- and see Pub. 925 for information on the recapture rules	19b	

Part IV Deductible Loss

20	Amount at risk. Enter the larger of line 10b or line 19b	20	19,525.
21	Deductible loss. Enter the smaller of the line 5 loss (treated as a positive number) or line 20. See page 7 of the instructions to find out how to report any deductible loss and any carryover.	21	STMT 14 (7,190)

Note: If the loss is from a passive activity, see the Instructions for **Form 8582**, *Passive Activity Loss Limitations*, or the Instructions for **Form 8810**, *Corporate Passive Activity Loss and Credit Limitations*, to find out if the loss is allowed under the passive activity rules. If only part of the loss is subject to the passive activity loss rules, report only that part on Form 8582 or Form 8810, whichever applies.

For Paperwork Reduction Act Notice, see page 8 of the instructions.

Form **6198** (2007)

Form **6198**
Department of the Treasury
Internal Revenue ServicePg. 28 of 103
At-Risk Limitations▶ Attach to your tax return.
▶ See separate instructions.

OMB No. 1545-0712

2007
Attachment
Sequence No. 31

Name(s) shown on return

ALTERNATIVE MINIMUM TAX

Identifying number

ANDREW COHEN & RITA COHEN

Description of activity (see page 2 of the instructions)

VIANIX LC

Part I Current Year Profit (Loss) From the Activity, Including Prior Year Nondeductible Amounts
(see page 2 of the instructions).

1	Ordinary income (loss) from the activity (see page 2 of the instructions)	1	-7,849.
2	Gain (loss) from the sale or other disposition of assets used in the activity (or of your interest in the activity) that you are reporting on:		
a	Schedule D	2a	
b	Form 4797	2b	
c	Other form or schedule	2c	
3	Other income and gains from the activity, from Schedule K-1 of Form 1065, Form 1065-B, or Form 1120S, that were not included on lines 1 through 2c	3	716.
4	Other deductions and losses from the activity, including investment interest expense allowed from Form 4952, that were not included on lines 1 through 2c	4	(48)
5	Current year profit (loss) from the activity. Combine lines 1 through 4. See page 3 of the instructions before completing the rest of this form	5	-7,181.

Part II Simplified Computation of Amount At Risk. See page 3 of the instructions before completing this part.

6	Adjusted basis (as defined in section 1011) in the activity (or in your interest in the activity) on the first day of the tax year. Do not enter less than zero	6	19,507.
7	Increases for the tax year (see page 3 of the instructions)	7	
8	Add lines 6 and 7	8	19,507.
9	Decreases for the tax year (see page 4 of the instructions)	9	
10a	Subtract line 9 from line 8	10a	19,507.
b	If line 10a is more than zero, enter that amount here and go to line 20 (or complete Part III). Otherwise, enter -0- and see Pub. 925 for information on the recapture rules	10b	19,507.

Part III Detailed Computation of Amount At Risk. If you completed Part III of Form 6198 for 2006, see page 4 of the instructions.

11	Investment in the activity (or in your interest in the activity) at the effective date. Do not enter less than zero	11	
12	Increases at effective date	12	
13	Add lines 11 and 12	13	
14	Decreases at effective date	14	
15	Amount at risk (check box that applies):		
a	<input type="checkbox"/> At effective date. Subtract line 14 from line 13. Do not enter less than zero.	15	
b	<input type="checkbox"/> From 2006 Form 6198, line 19b. Do not enter the amount from line 10b of the 2006 form.		
16	Increases since (check box that applies):		
a	<input type="checkbox"/> Effective date	16	
b	<input type="checkbox"/> The end of your 2006 tax year		
17	Add lines 15 and 16	17	
18	Decreases since (check box that applies):		
a	<input type="checkbox"/> Effective date	18	
b	<input type="checkbox"/> The end of your 2006 tax year		
19a	Subtract line 18 from line 17	19a	
b	If line 19a is more than zero, enter that amount here and go to line 20. Otherwise, enter -0- and see Pub. 925 for information on the recapture rules	19b	

Part IV Deductible Loss

20	Amount at risk. Enter the larger of line 10b or line 19b	20	19,507.
21	Deductible loss. Enter the smaller of the line 5 loss (treated as a positive number) or line 20. See page 7 of the instructions to find out how to report any deductible loss and any carryover.	21	STMT 15 (7,181)

Note: If the loss is from a passive activity, see the Instructions for **Form 8582**, *Passive Activity Loss Limitations*, or the Instructions for **Form 8810**, *Corporate Passive Activity Loss and Credit Limitations*, to find out if the loss is allowed under the passive activity rules. If only part of the loss is subject to the passive activity loss rules, report only that part on Form 8582 or Form 8810, whichever applies.

For Paperwork Reduction Act Notice, see page 8 of the instructions.

Form **6198** (2007)

Form

6251**Alternative Minimum Tax - Individuals**

Pg. 29 of 103

OMB No. 1545-0074

2007Attachment
Sequence No. **32**Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach to Form 1040 or Form 1040NR.

Name(s) shown on Form 1040 or Form 1040NR

ANDREW COHEN & RITA COHEN

Your social security number

Part I Alternative Minimum Taxable Income (See instructions for how to complete each line.)

1	If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, enter the amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)	1	409,223.
2	Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	2	NONE
3	Taxes from Schedule A (Form 1040), line 9	3	38,985.
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions	4	
5	Miscellaneous deductions from Schedule A (Form 1040), line 27	5	NONE
6	If Form 1040, line 38, is over \$156,400 (over \$78,200 if married filing separately), enter the amount from line 11 of the Itemized Deductions Worksheet on page A-10 of the instructions for Schedule A (Form 1040)	6	(5,936.)
7	Tax refund from Form 1040, line 10 or line 21	7	(3,731.)
8	Investment interest expense (difference between regular tax and AMT)	8	
9	Depletion (difference between regular tax and AMT)	9	
10	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
11	Interest from specified private activity bonds exempt from the regular tax	11	
12	Qualified small business stock (7% of gain excluded under section 1202)	12	
13	Exercise of incentive stock options (excess of AMT income over regular tax income)	13	
14	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	14	
15	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	15	
16	Disposition of property (difference between AMT and regular tax gain or loss)	16	
17	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) STMT 16	17	44.
18	Passive activities (difference between AMT and regular tax income or loss)	18	NONE
19	Loss limitations (difference between AMT and regular tax income or loss)	19	
20	Circulation costs (difference between regular tax and AMT)	20	
21	Long-term contracts (difference between AMT and regular tax income)	21	
22	Mining costs (difference between regular tax and AMT)	22	
23	Research and experimental costs (difference between regular tax and AMT)	23	
24	Income from certain installment sales before January 1, 1987	24	()
25	Intangible drilling costs preference	25	
26	Other adjustments, including income-based related adjustments	26	NONE
27	Alternative tax net operating loss deduction	27	()
28	Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$207,500, see page 7 of the instructions.)	28	438,585.

Part II Alternative Minimum Tax

29	Exemption. (If this form is for a child under age 18, see page 7 of the instructions.)		
	IF your filing status is AND line 28 is not over THEN enter on line 29 Single or head of household \$112,500 \$44,350 Married filing jointly or qualifying widow(er) 150,000 66,250 Married filing separately 75,000 33,125	29	NONE
	If line 28 is over the amount shown above for your filing status, see page 7 of the instructions.		
30	Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 33 and 35 and skip the rest of Part II	30	438,585.
31	• If you are filing Form 2555 or 2555-EZ, see page 8 of the instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 55 here. • All others: If line 30 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result.	31	108,957.
32	Alternative minimum tax foreign tax credit (see page 8 of the instructions)	32	
33	Tentative minimum tax. Subtract line 32 from line 31	33	108,957.
34	Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 51). If you used Schedule J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Schedule J (see page 9 of the instructions)	34	98,417.
35	Alternative minimum tax. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	35	10,540.

For Paperwork Reduction Act Notice, see page 10 of the instructions.

JSA
7X4700 2.000Form **6251** (2007)

Part III Tax Computation Using Maximum Capital Gains Rates

36	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, enter the amount from line 3 of the worksheet on page 8 of the instructions	36	438,585.
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet on page D-10 of the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see page 9 of the instructions). If you are filing Form 2555 or 2555-EZ, see page 10 of the instructions for the amount to enter	37	79,555.
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see page 9 of the instructions). If you are filing Form 2555 or 2555-EZ, see page 10 of the instructions for the amount to enter	38	139.
39	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see page 10 of the instructions for the amount to enter	39	79,694.
40	Enter the smaller of line 36 or line 39	40	79,694.
41	Subtract line 40 from line 36	41	358,891.
42	If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result SEE STATEMENT 17 ▶	42	96,989.
43	Enter: <ul style="list-style-type: none"> • \$63,700 if married filing jointly or qualifying widow(er), • \$31,850 if single or married filing separately, or • \$42,650 if head of household. 	43	63,700.
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet on page D-10 of the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter -0-	44	325,136.
45	Subtract line 44 from line 43. If zero or less, enter -0-	45	
46	Enter the smaller of line 36 or line 37	46	79,555.
47	Enter the smaller of line 45 or line 46	47	
48	Multiply line 47 by 5% (.05) ▶	48	
49	Subtract line 47 from line 46	49	79,555.
50	Multiply line 49 by 15% (.15) ▶	50	11,933.
If line 38 is zero or blank, skip lines 51 and 52 and go to line 53. Otherwise, go to line 51.			
51	Subtract line 46 from line 40	51	139.
52	Multiply line 51 by 25% (.25) ▶	52	35.
53	Add lines 42, 48, 50, and 52	53	108,957.
54	If line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 36 by 26% (.26). Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	54	119,304.
55	Enter the smaller of line 53 or line 54 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 31. Instead, enter it on line 4 of the worksheet on page 8 of the instructions	55	108,957.

Form **8606**Department of the Treasury
Internal Revenue Service**Nondeductible IRAs**

▶ See separate instructions.

OMB No. 1545-0074

2007Attachment
Sequence No. **48**

▶ Attach to Form 1040, Form 1040A, or Form 1040NR.

Name. If married, file a separate form for each spouse required to file Form 8606. See page 5 of the instructions.

Your social security number

ANDREW COHEN

Home address (number and street, or P.O. box if mail is not delivered to your home)

Apt. no.

**Fill in Your Address Only
If You Are Filing This
Form by Itself and Not
With Your Tax Return**

City, town or post office, state, and ZIP code

Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, SEP, and SIMPLE IRAs

Complete this part only if one or more of the following apply.

- You made nondeductible contributions to a traditional IRA for 2007.
- You took distributions from a traditional, SEP, or SIMPLE IRA in 2007 **and** you made nondeductible contributions to a traditional IRA in 2007 or an earlier year. For this purpose, a distribution does not include a rollover, qualified charitable distribution, one-time distribution to fund an HSA, conversion, recharacterization, or return of certain contributions.
- You converted part, but not all, of your traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2007 (excluding any portion you recharacterized) **and** you made nondeductible contributions to a traditional IRA in 2007 or an earlier year.

1	Enter your nondeductible contributions to traditional IRAs for 2007, including those made for 2007 from January 1, 2008, through April 15, 2008 (see page 5 of the instructions)	1	
2	Enter your total basis in traditional IRAs (see page 5 of the instructions)	2	4,624.
3	Add lines 1 and 2	3	4,624.
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> In 2007, did you take a distribution from traditional, SEP, or SIMPLE IRAs, or make a Roth IRA conversion? </div> <div style="display: inline-block; vertical-align: middle; margin-left: 10px;"> No → Enter the amount from line 3 on line 14. Do not complete the rest of Part I. Yes → Go to line 4. </div>			
4	Enter those contributions included on line 1 that were made from January 1, 2008, through April 15, 2008	4	
5	Subtract line 4 from line 3	5	
6	Enter the value of all your traditional, SEP, and SIMPLE IRAs as of December 31, 2007, plus any outstanding rollovers (see page 6 of the instructions)	6	
7	Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2007. Do not include rollovers, qualified charitable distributions, a one-time distribution to fund an HSA, conversions to a Roth IRA, certain returned contributions, or recharacterizations of traditional IRA contributions (see page 6 of the instructions)	7	
8	Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2007. Do not include amounts converted that you later recharacterized (see page 6 of the instructions). Also enter this amount on line 16	8	
9	Add lines 6, 7, and 8	9	
10	Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter "1.000"	10	X
11	Multiply line 8 by line 10. This is the nontaxable portion of the amount you converted to Roth IRAs. Also enter this amount on line 17	11	
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth IRA	12	
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions	13	
14	Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2007 and earlier years	14	4,624.
15	Taxable amount. Subtract line 12 from line 7. Also include this amount on Form 1040, line 15b; Form 1040A, line 11b; or Form 1040NR, line 16b	15	
Note: You may be subject to an additional 10% tax on the amount on line 15 if you were under age 59 1/2 at the time of the distribution (see page 6 of the instructions).			

For Privacy Act and Paperwork Reduction Act Notice, see page 8 of the instructions.

Form **8606** (2007)

Form 8606 (2007)

ANDREW COHEN

Page **2****Part II 2007 Conversions From Traditional, SEP, or SIMPLE IRAs to Roth IRAs**

Complete this part if you converted part or all of your traditional, SEP, and SIMPLE IRAs to a Roth IRA in 2007 (excluding any portion you recharacterized).

Caution: If your modified adjusted gross income is over \$100,000 or you are married filing separately and you lived with your spouse at any time in 2007, you **cannot** convert any amount from traditional, SEP, or SIMPLE IRAs to Roth IRAs for 2007. If you erroneously made a conversion, you must recharacterize (correct) it (see page 6 of the instructions).

16	If you completed Part I, enter the amount from line 8. Otherwise, enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2007. Do not include amounts you later recharacterized back to traditional, SEP, or SIMPLE IRAs in 2007 or 2008 (see page 6 of the instructions)	16	
17	If you completed Part I, enter the amount from line 11. Otherwise, enter your basis in the amount on line 16 (see page 6 of the instructions)	17	
18	Taxable amount. Subtract line 17 from line 16. Also include this amount on Form 1040, line 15b; Form 1040A, line 11b; or Form 1040NR, line 16b	18	

Part III Distributions From Roth IRAs

Complete this part only if you took a distribution from a Roth IRA in 2007. For this purpose, a distribution does not include a rollover, qualified charitable distribution, one-time distribution to fund an HSA, recharacterization, or return of certain contributions (see page 6 of the instructions).

19	Enter your total nonqualified distributions from Roth IRAs in 2007 including any qualified first-time homebuyer distributions (see page 6 of the instructions)	19	
20	Qualified first-time homebuyer expenses (see page 7 of the instructions). Do not enter more than \$10,000	20	
21	Subtract line 20 from line 19. If zero or less, enter -0- and skip lines 22 through 25	21	
22	Enter your basis in Roth IRA contributions (see page 7 of the instructions)	22	
23	Subtract line 22 from line 21. If zero or less, enter -0- and skip lines 24 and 25. If more than zero, you may be subject to an additional tax (see page 7 of the instructions)	23	
24	Enter your basis in Roth IRA conversions (see page 7 of the instructions)	24	
25	Taxable amount. Subtract line 24 from line 23. If zero or less, enter -0-. Also include this amount on Form 1040, line 15b; Form 1040A, line 11b; or Form 1040NR, line 16b	25	

Sign Here Only If You Are Filing This Form by Itself and Not With Your Tax Return

Under penalties of perjury, I declare that I have examined this form, including accompanying attachments, and to the best of my knowledge and belief, it is true, correct, and complete.

▶ Your signature ▶ Date

Paid Preparer's Use Only	Preparer's signature ▶	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code ▶	MCPHILLIPS, ROBERTS & DEANS, PLC 150 BOUSH STREET, SUITE 1100 NORFOLK		EIN 757 640-7190 Phone no. 757 640-7190 VA 23510

Form **8606** (2007)

Form **8606**Department of the Treasury
Internal Revenue Service**Nondeductible IRAs**

▶ See separate instructions.

OMB No. 1545-0074

2007Attachment
Sequence No. **48**

▶ Attach to Form 1040, Form 1040A, or Form 1040NR.

Name. If married, file a separate form for each spouse required to file Form 8606. See page 5 of the instructions.

Your social security number

RITA COHEN

**Fill in Your Address Only
If You Are Filing This
Form by Itself and Not
With Your Tax Return**

Home address (number and street, or P.O. box if mail is not delivered to your home)

Apt. no.

City, town or post office, state, and ZIP code

Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, SEP, and SIMPLE IRAs

Complete this part only if one or more of the following apply.

- You made nondeductible contributions to a traditional IRA for 2007.
- You took distributions from a traditional, SEP, or SIMPLE IRA in 2007 **and** you made nondeductible contributions to a traditional IRA in 2007 or an earlier year. For this purpose, a distribution does not include a rollover, qualified charitable distribution, one-time distribution to fund an HSA, conversion, recharacterization, or return of certain contributions.
- You converted part, but not all, of your traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2007 (excluding any portion you recharacterized) **and** you made nondeductible contributions to a traditional IRA in 2007 or an earlier year.

1	Enter your nondeductible contributions to traditional IRAs for 2007, including those made for 2007 from January 1, 2008, through April 15, 2008 (see page 5 of the instructions)	1	
2	Enter your total basis in traditional IRAs (see page 5 of the instructions)	2	4,000.
3	Add lines 1 and 2	3	4,000.
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> In 2007, did you take a distribution from traditional, SEP, or SIMPLE IRAs, or make a Roth IRA conversion? </div> <div style="display: inline-block; vertical-align: middle; margin-left: 10px;"> No → Enter the amount from line 3 on line 14. Do not complete the rest of Part I. Yes → Go to line 4. </div>			
4	Enter those contributions included on line 1 that were made from January 1, 2008, through April 15, 2008	4	
5	Subtract line 4 from line 3	5	
6	Enter the value of all your traditional, SEP, and SIMPLE IRAs as of December 31, 2007, plus any outstanding rollovers (see page 6 of the instructions)	6	
7	Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2007. Do not include rollovers, qualified charitable distributions, a one-time distribution to fund an HSA, conversions to a Roth IRA, certain returned contributions, or recharacterizations of traditional IRA contributions (see page 6 of the instructions)	7	
8	Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2007. Do not include amounts converted that you later recharacterized (see page 6 of the instructions). Also enter this amount on line 16	8	
9	Add lines 6, 7, and 8	9	
10	Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter "1.000"	10	X
11	Multiply line 8 by line 10. This is the nontaxable portion of the amount you converted to Roth IRAs. Also enter this amount on line 17	11	
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth IRA	12	
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions	13	
14	Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2007 and earlier years	14	4,000.
15	Taxable amount. Subtract line 12 from line 7. Also include this amount on Form 1040, line 15b; Form 1040A, line 11b; or Form 1040NR, line 16b	15	
Note: You may be subject to an additional 10% tax on the amount on line 15 if you were under age 59 1/2 at the time of the distribution (see page 6 of the instructions).			

For Privacy Act and Paperwork Reduction Act Notice, see page 8 of the instructions.

Form **8606** (2007)

Form 8606 (2007)

RITA COHEN

Page **2****Part II 2007 Conversions From Traditional, SEP, or SIMPLE IRAs to Roth IRAs**

Complete this part if you converted part or all of your traditional, SEP, and SIMPLE IRAs to a Roth IRA in 2007 (excluding any portion you recharacterized).

Caution: If your modified adjusted gross income is over \$100,000 or you are married filing separately and you lived with your spouse at any time in 2007, you **cannot** convert any amount from traditional, SEP, or SIMPLE IRAs to Roth IRAs for 2007. If you erroneously made a conversion, you must recharacterize (correct) it (see page 6 of the instructions).

16	If you completed Part I, enter the amount from line 8. Otherwise, enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2007. Do not include amounts you later recharacterized back to traditional, SEP, or SIMPLE IRAs in 2007 or 2008 (see page 6 of the instructions)	16	
17	If you completed Part I, enter the amount from line 11. Otherwise, enter your basis in the amount on line 16 (see page 6 of the instructions)	17	
18	Taxable amount. Subtract line 17 from line 16. Also include this amount on Form 1040, line 15b; Form 1040A, line 11b; or Form 1040NR, line 16b	18	

Part III Distributions From Roth IRAs

Complete this part only if you took a distribution from a Roth IRA in 2007. For this purpose, a distribution does not include a rollover, qualified charitable distribution, one-time distribution to fund an HSA, recharacterization, or return of certain contributions (see page 6 of the instructions).

19	Enter your total nonqualified distributions from Roth IRAs in 2007 including any qualified first-time homebuyer distributions (see page 6 of the instructions)	19	
20	Qualified first-time homebuyer expenses (see page 7 of the instructions). Do not enter more than \$10,000	20	
21	Subtract line 20 from line 19. If zero or less, enter -0- and skip lines 22 through 25	21	
22	Enter your basis in Roth IRA contributions (see page 7 of the instructions)	22	
23	Subtract line 22 from line 21. If zero or less, enter -0- and skip lines 24 and 25. If more than zero, you may be subject to an additional tax (see page 7 of the instructions)	23	
24	Enter your basis in Roth IRA conversions (see page 7 of the instructions)	24	
25	Taxable amount. Subtract line 24 from line 23. If zero or less, enter -0-. Also include this amount on Form 1040, line 15b; Form 1040A, line 11b; or Form 1040NR, line 16b	25	

Sign Here Only If You Are Filing This Form by Itself and Not With Your Tax Return

Under penalties of perjury, I declare that I have examined this form, including accompanying attachments, and to the best of my knowledge and belief, it is true, correct, and complete.

▶ Your signature ▶ Date

Paid Preparer's Use Only	Preparer's signature ▶	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code ▶	MCPHILLIPS, ROBERTS & DEANS, PLC 150 BOUSH STREET, SUITE 1100 NORFOLK		EIN 757 640-7190 Phone no. 757 640-7190 VA 23510

Form **8606** (2007)

Form **4952**Department of the Treasury
Internal Revenue Service**Investment Interest Expense Deduction**▶ **Attach to your tax return.**

OMB No. 1545-0191

2007
Attachment
Sequence No. **51**

Name(s) shown on return

Identifying number

ANDREW COHEN & RITA COHEN

Part I Total Investment Interest Expense

1	Investment interest expense paid or accrued in 2007 (see instructions)	SEE STATEMENT 18.	1	70.
2	Disallowed investment interest expense from 2006 Form 4952, line 7		2	
3	Total investment interest expense. Add lines 1 and 2		3	70.

Part II Net Investment Income

4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	4a	45,963.		
b	Qualified dividends included on line 4a	4b	7,126.		
c	Subtract line 4b from line 4a			4c	38,837.
d	Net gain from the disposition of property held for investment	4d	411,941.		
e	Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions)	4e	72,513.		
f	Subtract line 4e from line 4d			4f	339,428.
g	Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions)			4g	NONE
h	Investment income. Add lines 4c, 4f, and 4g			4h	378,265.
5	Investment expenses (see instructions)			5	3,975.
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-			6	374,290.

Part III Investment Interest Expense Deduction

7	Disallowed investment interest expense to be carried forward to 2008. Subtract line 6 from line 3. If zero or less, enter -0-	7	NONE
8	Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions	8	70.

Section references are to the Internal Revenue Code unless otherwise noted.

General Instructions**Purpose of Form**

Use Form 4952 to figure the amount of investment interest expense you can deduct for 2007 and the amount you can carry forward to future years. Your investment interest expense deduction is limited to your net investment income.

For more information, see Pub. 550, Investment Income and Expenses.

Who Must File

If you are an individual, estate, or a trust, you must file Form 4952 to claim a deduction for your investment interest expense.

Exception. You do not have to file Form 4952 if all of the following apply.

- Your investment income from interest and ordinary dividends minus any qualified dividends is more than your investment interest expense.
- You do not have any other deductible investment expenses.
- You do not have any carryover of disallowed investment interest expense from 2006.

Allocation of Interest Expense

If you paid or accrued interest on a loan and used the loan proceeds for more than one purpose, you may have to allocate the interest. This is necessary because different

rules apply to investment interest, personal interest, trade or business interest, home mortgage interest, and passive activity interest. See Pub. 535, Business Expenses.

Specific Instructions**Part I - Total Investment Interest Expense****Line 1**

Enter the investment interest expense paid or accrued during the tax year, regardless of when you incurred the indebtedness. Investment interest expense is interest paid or accrued on a loan or part of a loan that is allocable to property held for investment (as defined on this page).

Include investment interest expense reported to you on Schedule K-1 from a partnership or an S corporation. Include amortization of bond premium on taxable bonds purchased after October 22, 1986, but before January 1, 1988, unless you elected to offset amortizable bond premium against the interest payments on the bond. A taxable bond is a bond on which the interest is includible in gross income.

Investment interest expense does not include any of the following:

- Home mortgage interest.
- Interest expense that is properly allocable to a passive activity. Generally, a passive activity is any trade or business activity in which you do not materially participate and any rental activity. See the Instructions for Form 8582, Passive Activity Loss Limitations, for details.

- Any interest expense that is capitalized, such as construction interest subject to section 263A.

- Interest expense related to tax-exempt interest income under section 265.

- Interest expense, disallowed under section 264, on indebtedness with respect to life insurance, endowment, or annuity contracts issued after June 8, 1997, even if the proceeds were used to purchase any property held for investment.

Property held for investment. Property held for investment includes property that produces income, not derived in the ordinary course of a trade or business, from interest, dividends, annuities, or royalties. It also includes property that produces gain or loss, not derived in the ordinary course of a trade or business, from the disposition of property that produces these types of income or is held for investment. However, it does not include an interest in a passive activity.

Exception. A working interest in an oil or gas property that you held directly or through an entity that did not limit your liability is property held for investment, but only if you did not materially participate in the activity.

Part II - Net Investment Income**Line 4a**

Gross income from property held for investment includes income, unless derived in the ordinary course of a trade or business, from interest, ordinary dividends (except Alaska Permanent Fund dividends), annuities, and royalties. Include investment income

Form

4562Department of the Treasury
Internal Revenue Service**Depreciation and Amortization**
(Including Information on Listed Property)

OMB No. 1545-0172

2007Attachment
Sequence No. **67**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

ANDREW COHEN & RITA COHEN

Business or activity to which this form relates

Identifying number

SUMMARY FORM 4562**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2006 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2007	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ <input type="checkbox"/>		

Section B - Assets Placed in Service During 2007 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property		SEE				
b 5-year property		ACTIVITY				
c 7-year property		FORM				177.
d 10-year property		4562				
e 15-year property		DETAIL				
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C - Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System

20a Class life				S/L	
b 12-year			12 yrs.	S/L	
c 40-year			40 yrs.	MM	S/L

Part IV Summary (see instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	177.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Form

4562Department of the Treasury
Internal Revenue Service**Depreciation and Amortization**
(Including Information on Listed Property)

OMB No. 1545-0172

2007Attachment
Sequence No. **67**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

ANDREW COHEN & RITA COHEN

Business or activity to which this form relates

RITA A. COHEN

- SCHEDULE C

Part I Election To Expense Certain Property Under Section 179**Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2006 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2007	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ <input type="checkbox"/>		

Section B - Assets Placed in Service During 2007 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C - Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (see instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? ☒ **Yes** ☐ **No** **24b** If "Yes," is the evidence written? ☒ **Yes** ☐ **No**

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special allowance for qualified Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25								
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28								
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29								

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
30 Total business/investment miles driven during the year (do not include commuting miles)	2,600.					
31 Total commuting miles driven during the year	NONE					
32 Total other personal (noncommuting) miles driven	9,400.					
33 Total miles driven during the year. Add lines 30 through 32	12,000.					
34 Was the vehicle available for personal use during off-duty hours?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
35 Was the vehicle used primarily by a more than 5% owner or related person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
36 Is another vehicle available for personal use?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2007 tax year (see instructions):					
43 Amortization of costs that began before your 2007 tax year 43					
44 Total. Add amounts in column (f). See the instructions for where to report 44					

Form **4562**Department of the Treasury
Internal Revenue Service**Depreciation and Amortization**
(Including Information on Listed Property)

OMB No. 1545-0172

2007Attachment
Sequence No. **67**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

ANDREW COHEN & RITA COHEN

Business or activity to which this form relates

PERSONAL TRAINING

- SCHEDULE C

Part I Election To Expense Certain Property Under Section 179**Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2006 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2007	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2007 Tax Year Using the General Depreciation System

SEE DETAIL (a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property		1,239.	7.000	HY	200DB	177.
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C - Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (see instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	177.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?				Yes	<input checked="" type="checkbox"/> No	24b If "Yes," is the evidence written?				Yes	<input type="checkbox"/> No
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost			
25 Special allowance for qualified Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)								25			
26 Property used more than 50% in a qualified business use:											
		%									
		%									
		%									
27 Property used 50% or less in a qualified business use:											
		%				S/L -					
		%				S/L -					
		%				S/L -					
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1								28			
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29			

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30	Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6				
		2,500.									
31	Total commuting miles driven during the year	NONE									
32	Total other personal (noncommuting) miles driven	7,500.									
33	Total miles driven during the year. Add lines 30 through 32	10,000.									
34	Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
			X								
35	Was the vehicle used primarily by a more than 5% owner or related person?		X								
36	Is another vehicle available for personal use?		X								

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39	Do you treat all use of vehicles by employees as personal use?		
40	Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41	Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.			

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2007 tax year (see instructions):					
43 Amortization of costs that began before your 2007 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

SCHEDULE C DEPRECIATION AND AMORTIZATION

Asset description	Date placed in service	Unadjusted Cost or basis	Bus. %	179 exp. reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Method	Conv.	Life	ACRS class	MACRS class	Current-year 179 expense	Current-year depreciation
FITNESS EQUIPMENT	05/01/2007	1,239.	100.0000			1,239.		177.	200DB	HY			7		177.
Less: Retired Assets															
Subtotals		1,239.				1,239.		177.							177.

Less: Retired Assets															
Subtotals															
TOTALS		1,239.				1,239.		177.							177.

[illegible]

JSA
7X9024 1.000

COHEN

Less: Retired Assets									
TOTALS	1,239.				133.	177.	44.		

TD5204 -2YVG 04/14/2008 21:54:04 V07-5.5 7444

Name(s) shown on return
ANDREW COHEN & RITA COHEN

Identifying number

Section A - Regular Credit. Skip this section and go to Section B or C if you are electing or previously elected (and are not revoking) the alternative incremental credit or the alternative simplified credit, respectively.

1	Certain amounts paid or incurred to energy consortia (see instructions)	1	
2	Basic research payments to qualified organizations (see instructions)	2	
3	Qualified organization base period amount	3	
4	Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Wages for qualified services (do not include wages used in figuring the work opportunity credit)	5	
6	Cost of supplies	6	
7	Rental or lease costs of computers (see instructions)	7	
8	Enter the applicable percentage of contract research expenses (see instructions)	8	
9	Total qualified research expenses. Add lines 5 through 8	9	
10	Enter fixed-base percentage, but not more than 16% (see instructions)	10	%
11	Enter average annual gross receipts (see instructions)	11	
12	Multiply line 11 by the percentage on line 10	12	
13	Subtract line 12 from line 9. If zero or less, enter -0-	13	
14	Multiply line 9 by 50% (.50)	14	
15	Enter the smaller of line 13 or line 14	15	
16	Add lines 1, 4, and 15	16	
17	Are you electing the reduced credit under Section 280C? ▶ Yes <input type="checkbox"/> No <input type="checkbox"/> If "Yes," multiply line 16 by 13% (.13). If "No," multiply line 16 by 20% (.20) and see the instructions for the schedule that must be attached. Members of controlled groups or businesses under common control: see instructions for the schedule that must be attached	17	

Section B - Alternative Incremental Credit. Skip this section if you are completing Section A or C.

18	Certain amounts paid or incurred to energy consortia (see the line 1 instructions)	18	
19	Basic research payments to qualified organizations (see the line 2 instructions)	19	
20	Qualified organization base period amount (see the line 3 instructions)	20	
21	Subtract line 20 from line 19. If zero or less, enter -0-	21	
22	Add lines 18 and 21	22	
23	Multiply line 22 by 20% (.20)	23	
24	Wages for qualified services (do not include wages used in figuring the work opportunity credit)	24	
25	Cost of supplies	25	
26	Rental or lease costs of computers (see the line 7 instructions)	26	
27	Enter the applicable percentage of contract research expenses (see the line 8 instructions)	27	
28	Total qualified research expenses. Add lines 24 through 27	28	
29	Enter average annual gross receipts (see the line 11 instructions)	29	
30	Multiply line 29 by 1% (.01)	30	
31	Subtract line 30 from line 28. If zero or less, enter -0-	31	
32	Multiply line 29 by 1.5% (.015)	32	
33	Subtract line 32 from line 28. If zero or less, enter -0-	33	
34	Subtract line 33 from line 31	34	
35	Multiply line 29 by 2% (.02)	35	
36	Subtract line 35 from line 28. If zero or less, enter -0-	36	
37	Subtract line 36 from line 33	37	

Section B - Alternative Incremental Credit (continued)

38	Multiply line 34 by 3% (.03)	38	
39	Multiply line 37 by 4% (.04)	39	
40	Multiply line 36 by 5% (.05)	40	
41	Add lines 23, 38, 39, and 40	41	
42	Are you electing the reduced credit under Section 280C? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	42	
If "Yes," multiply line 41 by 65% (.65). If "No," enter the amount from line 41 and see the line 17 instructions for the schedule that must be attached. Members of controlled groups or businesses under common control: see instructions for the schedule that must be attached			

Section C - Alternative Simplified Credit. Skip this section if you are completing Section A or B.

43	Certain amounts paid or incurred to energy consortia (see the line 1 instructions)	43	
44	Basic research payments to qualified organizations (see the line 2 instructions)	44	
45	Qualified organization base period amount (see the line 3 instructions)	45	
46	Subtract line 45 from line 44. If zero or less, enter -0-	46	
47	Add lines 43 and 46	47	
48	Multiply line 47 by 20% (.20)	48	
49	Wages for qualified services (do not include wages used in figuring the work opportunity credit)	49	
50	Cost of supplies	50	
51	Rental or lease costs of computers (see the line 7 instructions)	51	
52	Enter the applicable percentage of contract research expenses (see the line 8 instructions)	52	
53	Total qualified research expenses. Add lines 49 through 52	53	
54	Enter your total qualified research expenses for the prior 3 tax years. If you had no qualified research expenses in any one of those years, skip lines 55 and 56	54	
55	Divide line 54 by 6.0	55	
56	Subtract line 55 from line 53. If zero or less, enter -0-	56	
57	Multiply line 56 by 12% (.12). If you skipped lines 55 and 56, multiply line 53 by 6% (.06)	57	
58	Add lines 48 and 57	58	
59	Are you electing the reduced credit under Section 280C? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	59	
If "Yes," multiply line 58 by 65% (.65). If "No," enter the amount from line 58 and see the line 17 instructions for the schedule that must be attached. Members of controlled groups or businesses under common control: see instructions for the schedule that must be attached			

Section D - Summary

60	Credit for increasing research activities from partnerships, S corporations, estates, and trusts	60	53.
61	Add line 17, line 42, or line 59 (whichever applies) to line 60. Estates and trusts go to line 62; partnerships and S corporations, report this amount on Schedule K; all others, report this amount on line 1c of Form 3800	61	53.
62	Amount allocated to beneficiaries of the estate or trust (see instructions)	62	
63	Estates and trusts: subtract line 62 from line 61. Report the credit on line 1c of Form 3800	63	

Form **8582****Passive Activity Loss Limitations**

OMB No. 1545-1008

2007Department of the Treasury
Internal Revenue Service (99)▶ See separate instructions.
▶ Attach to Form 1040 or Form 1041.Attachment
Sequence No. **88**

Name(s) shown on return

Identifying number

ANDREW COHEN & RITA COHEN

Part I 2007 Passive Activity Loss**Caution:** Complete Worksheets 1, 2, and 3 on page 2 before completing Part I.**Rental Real Estate Activities With Active Participation** (For the definition of active participation, see **Special Allowance for Rental Real Estate Activities** on page 3 of the instructions.)

1a Activities with net income (enter the amount from Worksheet 1, column (a))	1a		
b Activities with net loss (enter the amount from Worksheet 1, column (b))	1b	()	
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	1c	()	
d Combine lines 1a, 1b, and 1c	1d		

Commercial Revitalization Deductions From Rental Real Estate Activities

2a Commercial revitalization deductions from Worksheet 2, column (a)	2a	()	
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b	()	
c Add lines 2a and 2b	2c	()	

All Other Passive Activities

3a Activities with net income (enter the amount from Worksheet 3, column (a))	3a	55.	
b Activities with net loss (enter the amount from Worksheet 3, column (b))	3b	(16,858.)	
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	3c	(24,719.)	
d Combine lines 3a, 3b, and 3c	3d	-41,522.	

4 Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 8582. Report the losses on the forms and schedules normally used	4	-41,522.
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If line 4 is a loss and: ● Line 1d is a loss, go to Part II.

● Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.

● Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II or Part III. Instead, go to line 15.**Part II Special Allowance for Rental Real Estate Activities With Active Participation****Note:** Enter all numbers in Part II as positive amounts. See page 8 of the instructions for an example.

5 Enter the smaller of the loss on line 1d or the loss on line 4	5	
6 Enter \$150,000. If married filing separately, see page 8	6	
7 Enter modified adjusted gross income, but not less than zero (see page 8)	7	
Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.		
8 Subtract line 7 from line 6	8	
9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see page 8	9	
10 Enter the smaller of line 5 or line 9	10	

If line 2c is a loss, go to Part III. Otherwise, go to line 15.

Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities**Note:** Enter all numbers in Part III as positive amounts. See the example for Part II on page 8 of the instructions.

11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11	
12 Enter the loss from line 4	12	
13 Reduce line 12 by the amount on line 10	13	
14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13	14	

Part IV Total Losses Allowed

15 Add the income, if any, on lines 1a and 3a and enter the total	15	55.
16 Total losses allowed from all passive activities for 2007. Add lines 10, 14, and 15. See page 10 of the instructions to find out how to report the losses on your tax return	16	55.

Caution: The worksheets must be filed with your tax return. Keep a copy for your records.**Worksheet 1 - For Form 8582, Lines 1a, 1b, and 1c** (See pages 7 and 8 of the instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
Total. Enter on Form 8582, lines 1a, 1b, and 1c ▶					

Worksheet 2 - For Form 8582, Lines 2a and 2b (See page 8 of the instructions.)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b ▶			

Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See page 8 of the instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
VIANIX LC		7,858.	16,464.		24,322.
ENVEST II LLC	55.	9,000.	8,255.		17,200.
Total. Enter on Form 8582, lines 3a, 3b, and 3c ▶	55.	16,858.	24,719.		

Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See page 9 of the instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total ▶			1.00		

Worksheet 5 - Allocation of Unallowed Losses (See page 9 of the instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
VIANIX LC	SCH E, 28	24,322.	0.58576176	24,322.
ENVEST II LLC	SCH E, 28	17,200.	0.41423824	17,200.
Total ▶		41,522.	1.00	41,522.

Worksheet 6 - Allowed Losses (See pages 9 and 10 of the instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
VIANIX LC	SCH E, 28	24,322.	24,322.	
Total		24,322.	24,322.	

Worksheet 7 - Activities With Losses Reported on Two or More Forms or Schedules (See page 10 of the instructions.)

Name of Activity: SEE STATEMENT 22	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
Form or schedule and line number to be reported on (see instructions): _____					
1a Net loss plus prior year unallowed loss from form or schedule . . ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions): _____					
1a Net loss plus prior year unallowed loss from form or schedule . . ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions): _____					
1a Net loss plus prior year unallowed loss from form or schedule . . ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Total		17,255.	1.00	17,200.	55.

Form **8582****Passive Activity Loss Limitations**Pg 48 of 103
ALTERNATIVE MINIMUM TAX

▶ See separate instructions.

▶ Attach to Form 1040 or Form 1041.

OMB No. 1545-1008

2007Attachment
Sequence No. **88**Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on return

Identifying number

ANDREW COHEN & RITA COHEN

Part I 2007 Passive Activity Loss**Caution:** Complete Worksheets 1, 2, and 3 on page 2 before completing Part I.**Rental Real Estate Activities With Active Participation** (For the definition of active participation, see **Special Allowance for Rental Real Estate Activities** on page 3 of the instructions.)

1a Activities with net income (enter the amount from Worksheet 1, column (a))	1a		
b Activities with net loss (enter the amount from Worksheet 1, column (b))	1b	()	
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	1c	()	
d Combine lines 1a, 1b, and 1c	1d		

Commercial Revitalization Deductions From Rental Real Estate Activities

2a Commercial revitalization deductions from Worksheet 2, column (a)	2a	()	
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b	()	
c Add lines 2a and 2b	2c	()	

All Other Passive Activities

3a Activities with net income (enter the amount from Worksheet 3, column (a))	3a	55.	
b Activities with net loss (enter the amount from Worksheet 3, column (b))	3b	(16,598.)	
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	3c	(24,511.)	
d Combine lines 3a, 3b, and 3c	3d	-41,054.	

4 Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 8582. Report the losses on the forms and schedules normally used	4	-41,054.
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If line 4 is a loss and: ● Line 1d is a loss, go to Part II.

● Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.

● Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II or Part III. Instead, go to line 15.**Part II Special Allowance for Rental Real Estate Activities With Active Participation****Note:** Enter all numbers in Part II as positive amounts. See page 8 of the instructions for an example.

5 Enter the smaller of the loss on line 1d or the loss on line 4	5	
6 Enter \$150,000. If married filing separately, see page 8	6	
7 Enter modified adjusted gross income, but not less than zero (see page 8)	7	
Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.		
8 Subtract line 7 from line 6	8	
9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see page 8	9	
10 Enter the smaller of line 5 or line 9	10	
If line 2c is a loss, go to Part III. Otherwise, go to line 15.		

Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities**Note:** Enter all numbers in Part III as positive amounts. See the example for Part II on page 8 of the instructions.

11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11	
12 Enter the loss from line 4	12	
13 Reduce line 12 by the amount on line 10	13	
14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13	14	

Part IV Total Losses Allowed

15 Add the income, if any, on lines 1a and 3a and enter the total	15	55.
16 Total losses allowed from all passive activities for 2007. Add lines 10, 14, and 15. See page 10 of the instructions to find out how to report the losses on your tax return	16	55.

Caution: The worksheets must be filed with your tax return. Keep a copy for your records.**Worksheet 1 - For Form 8582, Lines 1a, 1b, and 1c** (See pages 7 and 8 of the instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
Total. Enter on Form 8582, lines 1a, 1b, and 1c					

Worksheet 2 - For Form 8582, Lines 2a and 2b (See page 8 of the instructions.)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b			

Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See page 8 of the instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
VIANIX LC		7,849.	16,464.		24,313.
ENVEST II LLC	55.	8,749.	8,047.		16,741.
Total. Enter on Form 8582, lines 3a, 3b, and 3c	55.	16,598.	24,511.		

Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See page 9 of the instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total			1.00		

Worksheet 5 - Allocation of Unallowed Losses (See page 9 of the instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
VIANIX LC	SCH E, 28	24,313.	0.5922200	24,313.
ENVEST II LLC	SCH E, 28	16,741.	0.4077800	16,741.
Total		41,054.	1.00	41,054.

Worksheet 6 - Allowed Losses (See pages 9 and 10 of the instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
VIANIX LC	SCH E, 28	24,313.	24,313.	
Total		24,313.	24,313.	

Worksheet 7 - Activities With Losses Reported on Two or More Forms or Schedules (See page 10 of the instructions.)

Name of Activity: SEE STATEMENT 23	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
Form or schedule and line number to be reported on (see instructions): _____					
1a Net loss plus prior year unallowed loss from form or schedule . . . ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions): _____					
1a Net loss plus prior year unallowed loss from form or schedule . . . ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions): _____					
1a Net loss plus prior year unallowed loss from form or schedule . . . ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Total		16,796.	1.00	16,741.	55.

Form **8582-CR****Passive Activity Credit Limitations**

Pg 51 of 103

OMB No. 1545-1034

2007Attachment
Sequence No. **89**Department of the Treasury
Internal Revenue Service

▶ See separate instructions.

▶ Attach to Form 1040 or 1041.

Name(s) shown on return

Identifying number

ANDREW COHEN & RITA COHEN**Part I 2007 Passive Activity Credits****Caution:** If you have credits from a publicly traded partnership, see **Publicly Traded Partnerships (PTPs)** on page 15 of the instructions.**Credits From Rental Real Estate Activities With Active Participation (Other Than Rehabilitation Credits and Low-Income Housing Credits)** (See Lines 1a through 1c on page 9.)

1 a Credits from Worksheet 1, column (a)	1a		
b Prior year unallowed credits from Worksheet 1, column (b)	1b		
c Add lines 1a and 1b		1c	

Rehabilitation Credits From Rental Real Estate Activities and Low-Income Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through Interests Acquired Before 1990) (See Lines 2a through 2c on page 9.)

2 a Credits from Worksheet 2, column (a)	2a		
b Prior year unallowed credits from Worksheet 2, column (b)	2b		
c Add lines 2a and 2b		2c	

Low-Income Housing Credits for Property Placed in Service After 1989 (See Lines 3a through 3c on page 9.)

3 a Credits from Worksheet 3, column (a)	3a		
b Prior year unallowed credits from Worksheet 3, column (b)	3b		
c Add lines 3a and 3b		3c	

All Other Passive Activity Credits (See Lines 4a through 4c on page 9.)

4 a Credits from Worksheet 4, column (a)	4a	53.	
b Prior year unallowed credits from Worksheet 4, column (b)	4b	94.	
c Add lines 4a and 4b		4c	147.

5 Add lines 1c, 2c, 3c, and 4c	5	147.
6 Enter the tax attributable to net passive income (see page 9)	6	NONE
7 Subtract line 6 from line 5. If line 6 is more than or equal to line 5, enter -0- and see page 10	7	147.

Note: If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II, III, or IV. Instead, go to line 37.**Part II Special Allowance for Rental Real Estate Activities With Active Participation****Note:** Complete this part only if you have an amount on line 1c. Otherwise, go to Part III.

8 Enter the smaller of line 1c or line 7	8	
9 Enter \$150,000. If married filing separately, see page 10	9	
10 Enter modified adjusted gross income, but not less than zero (see page 10). If line 10 is equal to or more than line 9, skip lines 11 through 15 and enter -0- on line 16	10	
11 Subtract line 10 from line 9	11	
12 Multiply line 11 by 50% (.50). Do not enter more than \$25,000. If married filing separately, see page 11	12	
13 a Enter the amount, if any, from line 10 of Form 8582	13a	
b Enter the amount, if any, from line 14 of Form 8582	13b	
c Add lines 13a and 13b	13c	
14 Subtract line 13c from line 12	14	
15 Enter the tax attributable to the amount on line 14 (see page 11)	15	
16 Enter the smaller of line 8 or line 15	16	

For Paperwork Reduction Act Notice, see page 16 of the instructions.

Form **8582-CR** (2007)

JSA

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Part III Special Allowance for Rehabilitation Credits From Rental Real Estate Activities and Low-Income Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through Interests Acquired Before 1990)
Note: Complete this part only if you have an amount on line 2c. Otherwise, go to Part IV.

17	Enter the amount from line 7	17	
18	Enter the amount from line 16	18	
19	Subtract line 18 from line 17. If zero, enter -0- here and on lines 30 and 36, and then go to Part V	19	
20	Enter the smaller of line 2c or line 19	20	
21	Enter \$250,000. If married filing separately, see page 12. (See page 12 to find out if you can skip lines 21 through 26.)	21	
22	Enter modified adjusted gross income, but not less than zero. (See instructions for line 10 on page 10.) If line 22 is equal to or more than line 21, skip lines 23 through 29 and enter -0- on line 30	22	
23	Subtract line 22 from line 21	23	
24	Multiply line 23 by 50% (.50). Do not enter more than \$25,000. If married filing separately, see page 12	24	
25a	Enter the amount, if any, from line 10 of Form 8582	25a	
b	Enter the amount, if any, from line 14 of Form 8582	25b	
c	Add lines 25a and 25b	25c	
26	Subtract line 25c from line 24	26	
27	Enter the tax attributable to the amount on line 26 (see page 12)	27	
28	Enter the amount, if any, from line 18	28	
29	Subtract line 28 from line 27	29	
30	Enter the smaller of line 20 or line 29	30	

Part IV Special Allowance for Low-Income Housing Credits for Property Placed in Service After 1989
Note: Complete this part only if you have an amount on line 3c. Otherwise, go to Part V.

31	If you completed Part III, enter the amount from line 19. Otherwise, subtract line 16 from line 7	31	
32	Enter the amount from line 30	32	
33	Subtract line 32 from line 31. If zero, enter -0- here and on line 36	33	
34	Enter the smaller of line 3c or line 33	34	
35	Tax attributable to the remaining special allowance (see page 12)	35	
36	Enter the smaller of line 34 or line 35	36	

Part V Passive Activity Credit Allowed

37	Passive Activity Credit Allowed. Add lines 6, 16, 30, and 36. See page 12 to find out how to report the allowed credit on your tax return and how to allocate allowed and unallowed credits if you have more than one credit or credits from more than one activity. If you have any credits from a publicly traded partnership, see Publicly Traded Partnerships (PTPs) on page 15	37	NONE
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Part VI Election To Increase Basis of Credit Property

38	If you disposed of your entire interest in a passive activity or former passive activity in a fully taxable transaction, and you elect to increase your basis in credit property used in that activity by the unallowed credit that reduced your basis in the property, check this box. See page 16	<input type="checkbox"/>
39	Name of passive activity disposed of	
40	Description of the credit property for which the election is being made	
41	Amount of unallowed credit that reduced your basis in the property	\$

SUPPLEMENT TO FORM 1040

SOURCES OF COMPENSATION

OWNER-SHIP	DESCRIPTION	TOTAL WAGES	FEDERAL WITHHELD	SOC. SEC. WITHHELD	MEDICARE WITHHELD
WAGES					
S	LARCHMONT UNITED	1,024.		63.	15.
T	LEAP FITNESS III LLC	266.		16.	4.
T	LEAP FITNESS INC	4,498.	1.	279.	65.
TOTAL - WAGES		5,788.	1.	358.	84.
GRAND TOTAL					
		5,788.	1.	358.	84.

OWNER-SHIP	WITHHOLDING FROM WAGES	STATE WITHHELD	CITY/LOCAL WITHHELD
S	LARCHMONT UNITED		
T	LEAP FITNESS III LLC	1.	
T	LEAP FITNESS INC	83.	
TOTAL WITHHOLDING FROM WAGES		84.	

SUPPLEMENT TO FORM 1040

QUALIFIED DIVIDENDS

QUALIFIED DIVIDENDS FROM FORM 1099

T VANGUARD - INTL STOCK INDEX	1,485.
T VANGUARD - STOCK MKT IDX ADM	3,939.
T AMERITRADE	1,702.

TOTAL FORM 1099 QUALIFIED DIVIDENDS	7,126.
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TOTAL TO 1040, LINE 9B	7,126.
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SUPPLEMENT TO FORM 1040

PERSONAL EXEMPTION WORKSHEET

1. IS THE AMOUNT ON FORM 1040, LINE 38 GREATER
THAN AMOUNT SHOWN ON LINE 4 BELOW FOR YOUR
FILING STATUS? IF YES, GO TO LINE 2.

2. TOTAL EXEMPTIONS MULTIPLIED BY \$ 3,400 13,600.

3. ENTER THE AMOUNT FROM FORM 1040, LINE 38 453,207.

4. FILING STATUS INCOME LIMIT 234,600.

5. SUBTRACT LINE 4 FROM LINE 3 218,607.

6. IS LINE 5 GREATER THAN \$122,500 (\$61,250 FOR MFS)?

X YES MULTIPLY \$1,133 BY THE TOTAL NUMBER OF EXEMPTIONS.
ENTER THE RESULT ON FORM 1040, LINE 42.

4532

NO DIVIDE LINE 5 BY 2,500 (1,250 IF MFS).IF THE RESULT IS
NOT A WHOLE NUMBER, INCREASE TO THE NEXT WHOLE NUMBER.

7. LINE 6 X 0.02

8. LINE 2 MULTIPLIED BY LINE 7

9. DIVIDE LINE 8 BY 1.5

10.DEDUCTION FOR EXEMPTIONS (LINE 2 LESS LINE 9) 4,532.

SUPPLEMENT TO SCHEDULE A

MEDICAL AND DENTAL EXPENSES

DOCTOR	13,787.
MEDICINE	1,721.
MEDICAL MASSAGE THERAPY	675.
INSURANCE	2,744.
MEDICAL MILES @.20 MI	120.

TOTAL TO SCHEDULE A, LINE 1	19,047.
	=====

PERSONAL PROPERTY TAXES

PERSONAL PROPERTY TAXES	225.
PERSONAL PORTION OF VEHICLE TAXES	86.

TOTAL TO SCHEDULE A, LINE 7	311.
	=====

HOME MORTGAGE INTEREST NOT REPORTED ON FORM 1098

OTHER MORTGAGE INTEREST NOT REPORTED ON FORM 1098	4,500.

TOTAL TO SCHEDULE A, LINE 11	4,500.
	=====

INVESTMENT INTEREST EXPENSE

AMERITRADE	61.
ENVEST II LLC	9.

SUBTOTAL OF INVESTMENT INTEREST EXPENSE	70.
LESS: DISALLOWED INVESTMENT INTEREST EXP./FORM 4952	NONE

TOTAL TO SCHEDULE A, LINE 14	70.
	=====

SUPPLEMENT TO SCHEDULE A

CASH CONTRIBUTIONS

PARTNERSHIP/S CORPORATION/ESTATE AND TRUST

50% ORGANIZATION(S)

VIANIX LC 5.

OTHER CASH CONTRIBUTIONS

50% ORGANIZATION(S)

MISCELLANEOUS 940.
 OLD DONATION CENTER 395.
 NATIONAL BREAST CANCER FOUNDATION 570.

TOTAL CASH CONTRIBUTIONS BEFORE LIMITATION 1,910.

CASH CONTRIBUTION LIMITATION NONE

TOTAL TO SCHEDULE A, LINE 16 1,910.

NONCASH CHARITABLE CONTRIBUTIONS

NONCASH CHARITABLE CONTRIBUTIONS LESS THAN \$500

PROPERTY GIVEN TO 50% ORGANIZATION(S)

VARIOUS CLOTHING, FURNITURE AND MISCELLANEOUS 480.

TOTAL NONCASH CONTRIBUTIONS BEFORE LIMITATION 480.

NONCASH CONTRIBUTION LIMITATION NONE

TOTAL TO SCHEDULE A, LINE 17 480.

OTHER MISC. DEDUCTIONS SUBJECT TO 2% LIMIT

PARTNERSHIP, S CORPORATION AND ESTATE AND TRUST 3,810.

TOTAL TO SCHEDULE A, LINE 23 3,810.

SUPPLEMENT TO SCHEDULE A

MISC. DEDUCTIONS NOT SUBJECT TO 2% LIMITATION

PORTFOLIO DEDUCTIONS FROM K-1 SOURCES

3,975.

TOTAL TO SCHEDULE A, LINE 28

3,975.
=====

SUPPLEMENT TO SCHEDULE A

ITEMIZED DEDUCTION WORKSHEET

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=====
1.  SCHEDULE A, LINES 4, 9, 15, 19, 20, 27, AND 28 ..... 49,920.
2.  SCHEDULE A, LINES 4, 14, 20, AND GAMBLING AND
    CASUALTY OR THEFT LOSSES INCLUDED ON LINE 28 ..... 70.
3.  LINE 1 LESS LINE 2 ..... 49,850.
4.  LINE 3 MULTIPLIED BY 80% ..... 39,880.
5.  ADJUSTED GROSS INCOME ..... 453,207.
6.  $156,400 ($78,200/MARRIED FILING SEP.).. 156,400.
7.  LINE 5 LESS LINE 6 ..... 296,807.
8.  LINE 7 MULTIPLIED BY 3% ..... 8,904.
9.  SMALLER OF AMOUNTS ON LINES 4 OR 8 ..... 8,904.
10. LINE 9 DIVIDED BY 3 ..... 2,968.
11. LINE 9 LESS LINE 10 ..... 5,936.
12. TOTAL ITEMIZED DEDUCTIONS (LINE 1 LESS LINE 11) ..... 43,984.
=====
```

SUPPLEMENT TO SCHEDULE C

GROSS RECEIPTS OR SALES - SCHEDULE C, LINE 1

BUSINESS NAME: RITA A. COHEN

LONG LEAF OPERA HOUSE 2,400.

TOTAL TO SCHEDULE C, LINE 1 2,400.

CAR AND TRUCK EXPENSES - SCHEDULE C, LINE 9

STANDARD MILEAGE RATE METHOD

BUSINESS NAME: RITA A. COHEN

VEHICLE 1

BUSINESS MILES 2,600.

X 0.485

1,261.

STANDARD MILEAGE FOR THIS VEHICLE 1,261.

STATE AND LOCAL PROPERTY TAXES (BUS. PORTION) 24.

TOTAL EXPENSE FOR THIS VEHICLE 1,285.

TOTAL TO SCHEDULE C, LINE 9 1,285.

SUPPLEMENT TO SCHEDULE C

GROSS RECEIPTS OR SALES - SCHEDULE C, LINE 1

BUSINESS NAME: PERSONAL TRAINING

FITNESS RESOURCE INC	1,186.
JAN'S GYM	869.

TOTAL TO SCHEDULE C, LINE 1	2,055.
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CAR AND TRUCK EXPENSES - SCHEDULE C, LINE 9

STANDARD MILEAGE RATE METHOD

BUSINESS NAME: PERSONAL TRAINING

VEHICLE 1

BUSINESS MILES	2,500.
X	0.485

1,213.

STANDARD MILEAGE FOR THIS VEHICLE	1,213.
-----------------------------------	--------

TOTAL TO SCHEDULE C, LINE 9	1,213.
-----------------------------	--------

SUPPLEMENT TO SCHEDULE D

=====

PART II LONG-TERM CAPITAL GAINS AND LOSSES - ASSETS HELD MORE THAN ONE YEAR

LINE 12 - LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS, AND FIDUCIARIES

ACTIVITY NAME	GAIN/LOSS
-----	-----
ENVEST II LLC	53,949.

TOTAL LONG-TERM GAINS AND LOSSES FROM K-1'S	53,949.

TOTAL TO SCHEDULE D, LINE 12	53,949.
	=====

SUPPLEMENT TO SCHEDULE D

=====

PART II LONG-TERM CAPITAL GAINS AND LOSSES
LINE 13 CAPITAL GAIN DISTRIBUTIONS

NAME OF PAYER	CAPITAL GAINS
AMERITRADE	593.
SUBTOTAL FROM CONSOLIDATED-1099	593.
TOTAL TO SCHEDULE D, LINE 13	593.

=====

SUPPLEMENT TO SCHEDULE E

PART II, INCOME OR LOSS FROM PARTNERSHIPS AND S CORPORATIONS
=====

COLUMNS (F) & (G) - PASSIVE INCOME OR LOSS

K-1 NAME: VIANIX LC
ID NUMBER: [REDACTED]

DESCRIPTION	INCOME/LOSS
-----	-----
ORDINARY INCOME OR LOSS	-7,858.
LESS:	
SUSPENDED LOSS CARRYOVER	16,464.
PLUS:	
DISALLOWED PASSIVE LOSS	24,322.

ALLOWABLE INCOME/LOSS	NONE
	=====

K-1 NAME: ENVEST II LLC
ID NUMBER: [REDACTED]

DESCRIPTION	INCOME/LOSS
-----	-----
ORDINARY INCOME OR LOSS	-5,883.
OTHER RENTAL INCOME OR LOSS	-3,108.
PLUS:	
OTHER INCOME	1.
LESS:	
OTHER	10.

NET INCOME/LOSS BEFORE LIMITATIONS	-9,000.

LESS:	
SUSPENDED LOSS CARRYOVER	8,255.
PLUS:	
DISALLOWED PASSIVE LOSS	17,200.

ALLOWABLE INCOME/LOSS	-55.
	=====

FORM 4797 - PART I: SALES OR EXCHANGES OF PROPERTY USED IN A TRADE OR BUSINESS AND INVOLUNTARY
CONVERSIONS FROM OTHER THAN CASUALTY OR THEFTS

=====

					(F)	
	(B)	(C)	(D)	(E)	COST OR OTHER	
	DATE	DATE	GROSS	DEPRECIATION	BASIS PLUS	(G)
(A)					IMPROVEMENTS &	
DESCRIP. OF PROPERTY	ACQUIRED	SOLD	SALES PRICE	ALLOWED	EXPENSE OF SALE	LOSS/GAIN

ENVEST II LLC						55.

PART I SEC. 1231 GAIN AND LOSS						55.
						=====

SUPPLEMENT TO FORM 6198

ACTIVITY NAME VIANIX LC

	LOSS	RATIO	DEDUCTIBLE LOSS	AT-RISK ADJUSTMENT
OPERATING LOSS	7,858.	0.9939287	7,858.	
NON-DEDUCTIBLE EXPENSE C/O	43.	0.0054389	43.	
CHARITABLE CONTRIB. - 50%	5.	0.0006324	5.	
TOTAL	7,906.	1.000	7,906.	

TOTAL DEDUCTIBLE LOSS

DEDUCTIBLE LOSS FROM FORM 6198, LINE 21

7,190.

INCOME/GAINS USED TO OFFSET ADDITIONAL LOSSES:

OTHER INCOME OR GAINS

716.

DEDUCTIBLE LOSS

7,906.

SUPPLEMENT TO FORM 6198AMT

ACTIVITY NAME VIANIX LC

	LOSS	RATIO	DEDUCTIBLE LOSS	AT-RISK ADJUSTMENT
ORDINARY LOSS	7,849.	0.9939217	7,849.	
NON-DEDUCTIBLE EXPENSE C/O	43.	0.0054451	43.	
CHARITABLE CONTRIB. - 50%	5.	0.0006332	5.	
TOTAL	7,897.	1.000	7,897.	

TOTAL DEDUCTIBLE LOSS

DEDUCTIBLE LOSS FROM FORM 6198AMT, LINE 21 7,181.

INCOME/GAINS USED TO OFFSET ADDITIONAL LOSSES:

OTHER INCOME OR GAINS 716.

DEDUCTIBLE LOSS 7,897.

SUPPLEMENT TO FORM 6251

POST '86 DEPRECIATION
=====

DESCRIPTION -----	ADJUSTMENT -----
PERSONAL TRAINING	44.
TOTAL TO FORM 6251, LINE 17	44.
	=====

LINE 29 - EXEMPTION WORKSHEET
=====

1.	\$44,350. IF SINGLE OR HEAD OF HOUSEHOLD	
	\$66,250. IF MARRIED FILING JT. OR QUAL. WIDOW(ER)	66,250.
	\$33,125. IF MARRIED FILING SEPARATELY	
2.	ALTERNATIVE MINIMUM TAXABLE INCOME, LINE 28	438,585.
3.	\$112,500. IF SINGLE OR HEAD OF HOUSEHOLD	
	\$150,000. IF MFJ OR QUAL. WIDOW(ER)	150,000.
	\$ 75,000. IF MARRIED FILING SEPARATELY	-----
4.	LINE 2 LESS LINE 3	288,585.
5.	MULTIPLY LINE 4 BY 25%	72,146.
6.	EXEMPTION AMOUNT (LINE 1 LESS LINE 5)	NONE
		=====

SUPPLEMENT TO FORM 6251

LINE 42 - WORKSHEET

=====

1. AMOUNT FROM FORM 6251, LINE 41	358,891.
2. LINE 1 MULTIPLIED BY 28%	100,489.
3. \$3,500 OR \$1,750 IF MARRIED FILING SEPARATELY	3,500.

4. TOTAL TO FORM 6251, LINE 42 (LINE 2 LESS LINE 3)	96,989.
	=====

LINE 54 - WORKSHEET

=====

1. AMOUNT FROM FORM 6251, LINE 36	438,585.
2. LINE 1 MULTIPLIED BY 28%	122,804.
3. \$3,500 OR \$1,750 IF MARRIED FILING SEPARATELY	3,500.

4. TOTAL TO FORM 6251, LINE 54 (LINE 2 LESS LINE 3)	119,304.
	=====

SUPPLEMENT TO FORM 4952

=====

DETAIL OF INVESTMENT INTEREST EXPENSE

	CURRENT YEAR	PRIOR YEAR
	-----	-----
DESCRIPTION	INV. INT.	DISALLOWED INV. INT.
-----	-----	-----
ENVEST II LLC	9.	
AMERITRADE	61.	
	-----	-----
TOTAL INVESTMENT INTEREST EXPENSE	70.	
	=====	=====

SUPPLEMENT TO FORM 4952

GAIN FROM INVESTMENT PROPERTIES

	ORDINARY GAIN	SHORT TERM LOSS	GAIN	LONG TERM LOSS	GAIN
CAP. GAIN DIST					593.
SCHEDULE D			339,428.		71,920.
TOTAL			339,428.		72,513.

NET GAIN - PROPERTY HELD FOR INVESTMENT - FORM 4952 LINE 4D 411,941.
=====

ELECTION TO INCLUDE QUAL.DIV.& NET CAP.GAIN AS INV.INCOME

GROSS INCOME EXCLUDING QUAL. DIV. - FORM 4952 LINE 4C	38,837.	
ORDINARY GAIN - PROPERTY HELD FOR INVESTMENT	339,428.	
TOTAL INCOME BEFORE CAPITAL GAIN		378,265.
TOTAL INVESTMENT INTEREST EXPENSES - FORM 4952 LN. 3	70.	
INVESTMENT EXPENSES - FORM 4952 LINE 5	3,975.	
TOTAL EXPENSES		4,045.
EXCESS TOTAL EXPENSES OVER TOTAL INCOME		NONE
QUALIFIED DIVIDENDS		7,126.
NET LONG-TERM CAPITAL GAIN - INVESTMENT PROPERTY	72,513.	
NET SHORT-TERM CAPITAL LOSS - INVESTMENT PROPERTY	NONE	
NET CAPITAL GAIN		72,513.
NET CAPITAL GAIN YOU MAY ELECT TO REPORT AS ORDINARY		NONE
QUALIFIED DIVIDENDS YOU MAY ELECT TO INCLUDE IN INV. INC.		NONE
NET CAPITAL GAIN ELECTED TO BE REPORTED AS ORDINARY		NONE
QUALIFIED DIVIDENDS ELECTED TO BE INCLUDED IN INV. INC.		NONE

CONTINUED...

STATEMENT 19

SUPPLEMENT TO FORM 4952

=====

ELECTION TO INCLUDE QUAL.DIV.& NET CAP.GAIN AS INV.INCOME (CONT'D)

TOTAL ELECTION TO BE INCLUDED IN INVESTMENT INCOME
- FORM 4952 LINE 4G

NONE
=====

SUPPLEMENT TO FORM 4952

DETAIL OF INVESTMENT INCOME MINUS EXPENSES

1. CHILD'S INCOME FROM FORM 8814		
2. INTEREST INCOME	702.	
3. DIVIDEND INCOME	43,383.	
4. ANNUITIES		
5. ROYALTY INCOME.....		
6. K-1 SOURCES INVESTMENT INCOME	1,878.	

7. GROSS INVESTMENT INCOME		45,963.
8. QUALIFIED DIVIDENDS		7,126.

9. GROSS INVESTMENT INCOME EXCLUDING QUALIFIED DIV.		38,837.
10. ORDINARY SECTION 1245, 1250 & 1254 INCOME		
11. NET CAPITAL GAIN FROM INVESTMENT PROPERTY	72,513.	
12. NET GAIN FROM INVESTMENT PROPERTY	411,941.	
13. LINE 12 LESS LINE 11		339,428.
14. INVESTMENT INCOME ELECTION		NONE

15. TOTAL INVESTMENT INCOME		378,265.
16. ROYALTY EXPENSES		
17. INVESTMENT EXPENSES	3,975.	

18. TOTAL INVESTMENT EXPENSES		3,975.

19. TOTAL NET INVESTMENT INCOME		374,290.
		=====

SUPPLEMENT TO 8582 WORKSHEET 7

WORKSHEET 7 - ACTIVITIES WITH LOSSES REPORTED ON TWO OR MORE FORMS

NAME OF ACTIVITY	FORM OR SCHEDULE	PRELIMINARY AMOUNTS		(B)	(C)RATIO	(D)UNALLOWED	(E)ALLOWED
		(1A)LOSS	(1B)INCOME			LOSS	LOSS
ENVEST II LLC	SCH E, 28 FORM 4797	17,255.	55.	17,255.	1.00000000	17,200.	55.
		17,255.	55.	17,255.	1.00000000	17,200.	55.
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SUPPLEMENT TO 8582 WORKSHEET 7 - AMT

WORKSHEET 7 - ACTIVITIES WITH LOSSES REPORTED ON TWO OR MORE FORMS

NAME OF ACTIVITY	FORM OR SCHEDULE	PRELIMINARY AMOUNTS		(B)	(C)RATIO	(D)UNALLOWED LOSS	(E)ALLOWED LOSS
		(1A)LOSS	(1B)INCOME				
ENVEST II LLC	SCH E, 28 FORM 4797	16,796.	55.	16,796.	1.0000000	16,741.	55.
		16,796.	55.	16,796.	1.0000000	16,741.	55.
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SUPPLEMENT TO FORM 8582-CR

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TAX ATTRIBUTABLE TO PASSIVE INCOME - LINE 6

TOTAL TAX LIABILITY NONE

TAXABLE INCOME INCLUDING PASSIVE INCOME

LESS: NET PASSIVE INCOME FROM FORM 8582

PLUS: LOSSES FROM DISPOSITION

INCOME WITHOUT PASSIVE INCOME

LESS: TAX ON NON-PASSIVE INCOME NONE

TAX ATTRIBUTABLE TO PASSIVE INCOME, LINE 6 NONE

=====

Pg 77 of 103
MCPIfILLIPS, ROBERTS & DEANS, PLC

CERTIFIED PUBLIC ACCOUNTANTS

MEMBERS

TOWN POINT CENTER, SUITE 1100
NORFOLK, VIRGINIA 23510

POST OFFICE BOX 1180

AMERICAN INSTITUTE OF CERTIFIED
PUBLIC ACCOUNTANTS

VIRGINIA SOCIETY OF CERTIFIED
PUBLIC ACCOUNTANTS

NATIONAL ASSOCIATED
CERTIFIED PUBLIC
ACCOUNTING FIRMS

NORFOLK, VIRGINIA 23501-1180

(757) 640-7190

FAX (757) 640-7297

ANDREW COHEN & RITA COHEN
INSTRUCTIONS FOR FILING FORM
760

2007 VIRGINIA RESIDENT INCOME TAX RETURN

SIGNATURE..

THE ORIGINAL RETURN SHOULD BE SIGNED (USE FULL NAME) AND DATED ON
PAGE 2 BY THE TAXPAYER AND SPOUSE.

OVERPAYMENT..

YOUR RETURN SHOWS A \$826. OVERPAYMENT. OF THIS AMOUNT, NONE WILL BE
REFUNDED TO YOU, AND \$826. HAS BEEN APPLIED TO YOUR 2008 ESTIMATED
TAX.

FILING..

FILE YOUR SIGNED RETURN BY MAY 1, 2008 WITH:

DEPARTMENT OF TAXATION
P.O. BOX 760
RICHMOND, VIRGINIA 23218-0760

MAILING..

YOUR RETURN SHOULD BE MAILED BY EITHER REGISTERED OR CERTIFIED
MAIL, WITH THE SENDER'S RECEIPT POSTMARKED TO PROVE MAILING BEFORE
THE DUE DATE.

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 MCPHILLIPS, ROBERTS & DEANS, PLC

CERTIFIED PUBLIC ACCOUNTANTS

MEMBERS

TOWN POINT CENTER, SUITE 1100
NORFOLK, VIRGINIA 23510

POST OFFICE BOX 1180

AMERICAN INSTITUTE OF CERTIFIED
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NORFOLK, VIRGINIA 23501-1180

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(757) 640-7190

NATIONAL ASSOCIATED
CERTIFIED PUBLIC
ACCOUNTING FIRMS

FAX (757) 640-7297

ANDREW COHEN & RITA COHEN
 INSTRUCTIONS FOR FILING FORM
 760ES

2008 VIRGINIA ESTIMATED INCOME TAX PAYMENT VOUCHER

PAYMENT OF ESTIMATED TAX..

THE APPROPRIATE VOUCHER FORM SHOULD ACCOMPANY EACH PAYMENT AS
 FOLLOWS...

VOUCHER	ON OR BEFORE-	AMOUNT
1	MAY 1, 2008	\$
2	JUNE 15, 2008	\$
3	SEPTEMBER 15, 2008	\$
4	JANUARY 15, 2009	\$

OVERPAYMENT OF 2007 INCOME TAX CREDITED		
AGAINST 2008 TAX		-----
TOTAL 2008 ESTIMATED TAX PAYMENTS		\$
ESTIMATED INCOME TAX TO BE WITHHELD IN 2008 ...		
ESTIMATED CREDITS		-----
TOTAL ESTIMATE OF 2008 INCOME TAX		\$
		=====

FILING..

THE FIRST VOUCHER, TOGETHER WITH YOUR CHECK, SHOULD BE FILED WITH:

DEPARTMENT OF TAXATION
 P.O. BOX 1478
 RICHMOND, VIRGINIA 23218-1478

ALL REMAINING VOUCHERS SHOULD BE FILED WITH:

DEPARTMENT OF TAXATION
 P.O. BOX 1478
 RICHMOND, VIRGINIA 23218-1478

YOUR SOCIAL SECURITY NUMBER AND "2008 ESTIMATED TAX"
 SHOULD BE INDICATED ON EACH CHECK. CHECKS SHOULD BE MADE
 PAYABLE TO THE TREASURER (CITY OR COUNTY).

2008 ESTIMATED INCOME TAX WORKSHEET FOR INDIVIDUALS**PART I - COMPUTE YOUR ESTIMATED 2008 VIRGINIA INCOME TAX**

See the instruction book for the income tax return you will file to determine the amounts for Lines 1 through 4.

1. Expected Virginia ADJUSTED GROSS INCOME subject to tax in 2008 (includes the age deduction plus additions to and subtractions from federal adjusted gross income)

See Section I on Page 1 to see if you are required to file Form 760ES 1

- 2a If you will itemize deductions on your 2008 federal return, enter the estimated total of those deductions,
-
- less state and local tax (Fixed Date Conformity adjustments should be made where applicable). 2a

OR

or

- 2b If you will not itemize deductions, enter the standard deduction (updated) amount for your filing status

Single: \$3,000, Married, filing joint or combined return: \$6,000, Married, filing separately: \$3,000 2b

3. Expected amount of qualifying child and dependent care expenses 3

4. Personal exemptions (Personal exemptions X \$930. Exemptions for "65 or over" & "Blind" X \$800) 4

5. Add Line 2a OR Line 2b, Line 3 and Line 4 5

6. ESTIMATED Virginia TAXABLE INCOME (Line 1 less Line 5) 6

7. Virginia INCOME TAX for amount on Line 6 (See Tax Rate Schedule on Page 2, Section III) 7

8. TAX ADJUSTMENTS (See Tax Credits and Adjustments on Page 2, Section III) 8

9. YOUR ESTIMATED 2008 VIRGINIA INCOME TAX (Line 7 less Line 8) 9

10. TOTAL ESTIMATED 2008 VIRGINIA INCOME TAX (Line 9, Column A plus Column B) 10

See Section I on Page 1 before continuing to see if you are required to make estimated income tax payments.**PART II - COMPUTE YOUR ESTIMATED INCOME TAX PAYMENTS**

11. Estimated 2008 Virginia income tax (Enter amount from Line 10 above) 11

12. Amount you estimate will be withheld from your wages for the year 12

13. Estimated income tax due (Line 11 less Line 12) 13

14. Enter the number of payments required (See Section II on Page 1 or the Payment Schedule below) 14

- 15.
- INSTALLMENT PAYMENT AMOUNT.**
- Divide the amount on Line 13 by the number of payments on Line 14.

(If you had a 2007 overpayment credit, subtract the amount of the overpayment credit that you are applying to this installment.) Enter the amount here and on Form 760ES. **Attach your check or money order for this amount*** . 15*To pay electronically, see our Web-site www.tax.virginia.gov. Use the estimated tax payment record section on Page 4 to record your tax payments.**PAYMENT SCHEDULE**

The estimated income tax return and payment of an individual, other than a self-employed farmer, fisherman, or merchant seaman is to be filed on or before May 1 of the taxable year, unless the requirements to file are not met until after April 15. Use the table below to determine the number and amount of each installment payment. (Fiscal year filers substitute the corresponding fiscal year months for the months specified in this table.)

IF THE REQUIREMENTS ARE FIRST MET IN THE TAXABLE YEAR-	NUMBER OF PAYMENTS REQUIRED	FILE FORM 760ES ON OR BEFORE	AND USE VOUCHER NUMBER	THE FOLLOWING PERCENTAGES OF THE ESTIMATED TAX ARE TO BE PAID ON OR BEFORE -			
				May 1	June 15	September 15	January 15
on or before April 15th	4	May 1, 2008	1	25%	25%	25%	25%
after April 15th and before June 2nd	3	June 15, 2008	2	• • • • •	33 1/3%	33 1/3%	33 1/3%
after June 1st and before Sept. 2nd	2	Sept. 15, 2008	3	• • • • •	• • • • •	50%	50%
after Sept. 1st and before Dec. 31st	1	Jan. 15, 2009	4	• • • • •	• • • • •	• • • • •	100%

7B5601 2.000

1062

2008 FORM 760ES/CG - Voucher

1

(DOC ID 762)

VIRGINIA ESTIMATED INCOME TAX PAYMENT VOUCHER FOR
INDIVIDUALSFirst time filers or address
change check here

LOCALITY NO.

FOR OFFICE USE

810

DUE DATE: 05/01/08

**Check here if this is your first payment for
this taxable year.**

7621062 108057 900

FISCAL YEAR FILERS: BEGINNING MONTH:

Your account number

Spouse's account number

Amount of payment

— Do not write below this line. —

Daytime Phone Number

0000000000

1062 7B5602 1.000

2008 FORM 760ES/CG - Voucher 2
(DOC ID 762)

VIRGINIA ESTIMATED INCOME TAX PAYMENT VOUCHER FOR
INDIVIDUALS

DUE DATE: 06/15/08

First time filers or address
change check here

LOCALITY NO.

FOR OFFICE USE

810

**Check here if this is your first payment for
this taxable year.**

FISCAL YEAR FILERS: BEGINNING MONTH:

7621062 108065 900

Amount of payment

— Do not write below this line. —

Daytime Phone Number 0000000000

1062 7B5602 1.000

2008 FORM 760ES/CG - Voucher 3
(DOC ID 762)

VIRGINIA ESTIMATED INCOME TAX PAYMENT VOUCHER FOR
INDIVIDUALS

DUE DATE: 09/15/08

First time filers or address
change check here

LOCALITY NO.

FOR OFFICE USE

810

**Check here if this is your first payment for
this taxable year.**

FISCAL YEAR FILERS: BEGINNING MONTH:

Your account number

Spouse's account number

7621062 108091 900

Amount of payment

— Do not write below this line. —

Daytime Phone Number 0000000000

1062 7B5602 1.000

2008 FORM 760ES/CG - Voucher 4
(DOC ID 762)

VIRGINIA ESTIMATED INCOME TAX PAYMENT VOUCHER FOR
INDIVIDUALS

DUE DATE: 01/15/09

First time filers or address
change check here

LOCALITY NO.

FOR OFFICE USE

810

**Check here if this is your first payment for
this taxable year.**

FISCAL YEAR FILERS: BEGINNING MONTH:

Your account number

Spouse's account number

7621062 109010 900

Amount of payment

— Do not write below this line. —

Daytime Phone Number 0000000000

Pg 83 of 103
2008 ESTIMATED INCOME TAX WORKSHEET
For Estates and Trusts

1	Expected federal taxable income of the estate or trust	1		
2	Fiduciary's share of Virginia modifications	2		
3	Estimated Virginia taxable income (line 1 less line 2)	3		
4	Virginia income tax for amount on line 3 (See Section III)	4		
5	Tax credits (See Section III)	5		
6	ESTIMATE OF THE FIDUCIARY OR ESTATE INCOME TAX (line 4 less line 5).	6		

See Section I on page 1 to see if you meet the estimated tax filing requirements. If you do, enter the result of line 6 above on line 11 of the estimated income tax worksheet on page 3, then complete the rest of the worksheet to determine the amount of your installment payment.

IMPORTANT:

Before filing the estimated income tax voucher, verify that the federal employer identification number of the estate or trust is in the "Your Social Security Number or FEIN" block. **Do not enter a social security number.**

2008 ESTIMATED TAX PAYMENT RECORD

Payment Made With:	Date	Check or Money Order Number	Check or Money Order Payment Amount	Overpayment Credit Applied	Total Amount Paid
Voucher 1			NONE		NONE
Voucher 2			NONE		NONE
Voucher 3			NONE		NONE
Voucher 4			NONE		NONE
Total			NONE		NONE



ANDREW COHEN
RITA COHEN
3750 JEFFERSON BOULEVARD

VIRGINIA BEACH VA 23455

Filing Status: 2 Head of Household:

Exemptions Dependents Total 65 and over Blind Total

Yourself 1 2 4
Spouse 1

Vendor ID: 1062W 1062

1. Fed Adj Gross Income 1. 453207.

2. Additions, see Pg 2, Line 3 2.

3. Subtotal 3. 453207.

4a. Age Deduction - You 4a.

4b. Age Deduction - Spouse 4b.

5. Soc Sec & Tier 1 Railroad 5.

6. State Inc Tax Overpayment 6. 3731.

7. Other Subtractions, see Pg 2, Line 7 7. NONE

8. Subtotal Subtractions 8. 3731.

9. Total VAGI 9. 449476.

10a. Federal Sch. A Itemized Deductions 10a. 43984.

10b. State/Local Income Tax 10b. 29499.

10. Standard/Itemized Deductions 10. 14485.

11. Exemptions 11. 3600.

12. Deductions VAGI see Pg 2, Line 9 12. 4000.

13. Subtotal Lines 10, 11 and 12 13. 22085.

14. VA Taxable Income 14. 427391.

15. Tax Amount 15. 24317.

16. Spouse Tax Adjustment 16. 259.

Name or Filing

Change:

Address

Change:

Virginia Return

Not Filed Last Year:

Your SSN COHE

Spouse's SSN COHE

16a. Your VAGI

16b. Spouse's VAGI

17. Net Tax

18a. Your Withholding

18b. Spouse's Withholding

19. Estimated Payments

20. Extension Payments

21. Credit for Low Income

22. Credit tax paid another state

23. Other Credits

24. Total Payments /Credits

25. Tax You Owe

26. Overpayment Amount

27. Amount to Credit to Next Year's Tax

28. Adjustments/Contributions

Amount You Owe:

Paid by Credit Card

Refund:

Bank Routing

Number

Bank Account

Number

Amended:

NOL:

Locality: 810

2007 **VA760CG** Page 2

ANDREW

COHEN

**ADDITIONAL FILING INFORMATION**

Farming/Fishing, Coalfield
Merchant Seaman: Enhancement

Taxpayer Fixed Date
Deceased: Conformity:

Dependent on Overseas
another's return: when due:

Federal Earned
Income Credit

Deductions

8. Deduction Code and Amount

104 8a. 2000.

104 8b. 2000.

8c.

9. Total Deductions 9. 4000.

Additions - SCH ADJ/CG - Part 1

1. Interest on obligations of other state 1.
2. Other Additions: 2a.
- 2b.
- 2c.
3. Total Additions: 3.

Spouse's Name - Filing Status 3 Only

AGE DEDUCTION DETAILS

You

Spouse

Contact Information

Your Phone 0000000000

Spouse

Dept of Taxation can discuss
my return with my preparer.

X

Preparer Phone Number

7576407190

Preparer Info

2

Subtractions

4. Income from obligations or securities of the U.S. 4.
5. Disability Income reported as wages 5.
6. Other: 6a.
- a. Fixed Date Conformity 6b.
- 00 6c.
- 6d.
7. Total Subtractions: 7. NONE

I (We), the undersigned, declare under penalty of law that I (we) have examined this return and to the best of my (our) knowledge, it is a true, correct and complete return.

Your Signature _____ Date _____

Spouse's Signature _____ Date _____

Preparer Signature _____ Date _____

MCPHILLIPS, ROBERTS & DEANS, PLC
150 BOUSH STREET, SUITE 1100
NORFOLK, VA 23510



ANDREW

COHEN

**Tax Credit for Low Income Individuals
or VA Earned Income Credit**10. Exemption Information Social Security
Number

VAGI

- a.
b.
c.
d.

22. Voluntary Contributions
from overpaid taxes

22a.

22b.

e. Total Family VAGI 10e. •

23. Other Voluntary Contributions

11. Total Exemptions 11. •

23a.

12. Personal Exemptions 12.

23b.

13. Form 760 exemptions
multiplied 12 by \$300 13.

School Foundation Contributions

14. Federal Earned Income Credit 14. •

23c.

15. Multiply Line 14 by 20% (.20) 15.

23d.

16. Greater of Line 13 or Line 15 16.

24. Total Adjustments

17. Credit (Lesser of Line 16
above or Page 1, Line 17) 17.**Amended Returns****Adjustments to Amount of Tax**25. Amount paid with original
return, plus additional tax
paid after it was filed 25.

18. Addition to Tax 18.

26. Add Line 25 from above
and Line 24 from Form 760,
enter here

26.

a. Addition from Form 760C

b. Addition from Form 760F

19. Penalty 19.

27. Overpayment, if any, as
shown on original return
or as previously adjusted 27.a. Late Filing
Penalty

b. Extension Penalty

28. Subtract Line 27 from Line 26 28.

29. Tax You Owe 29.

20. Interest 20.

30. Tax You Overpaid 30.

21. Consumer's Use Tax 21.

AVOID DELAYS. If this schedule contains information, always submit it with your return.

2007 Virginia Schedule FED

Pg 87 of 103



ANDREW COHEN
 RITA COHEN
 3750 JEFFERSON BOULEVARD

VIRGINIA BEACH

VA 23455

810

SCHEDULE C, SCHEDULE C-EZ and/or SCHEDULE F INFORMATION

1. Schedule Name	First Schedule Info. C	Second Schedule Info. C
2. Gross Receipts or Sales	2400.	2055.
3. Depreciation / expense deduction		177.
4. Business Activity Code	711510	812990
5. Business Locality Code		
6. Car and truck expenses	1285.	1213.
7. Inventory at end of year		
8. Number of miles you used your vehicle for: Business	2600	2500
9. Number of miles you used your vehicle for: Commuting	NONE	NONE
10. Number of miles you used your vehicle for: Other	9400	7500

SCHEDULE 2106 and/or SCHEDULE 2106-EZ INFORMATION

11. Number of miles you used your vehicle for: Business	2600	2500
12. Number of miles you used your vehicle for: Commuting	NONE	NONE
13. Number of miles you used your vehicle for: Other	9400	7500
14. Percent of business use of vehicle: Vehicle 1	2167	2500
15. Percent of business use of vehicle: Vehicle 2		

SCHEDULE 4562 INFORMATION

16. Property Used more than 50% in a qualified business use:
 Type of property

17. Date placed in service

18. Business/investment use percentage

19. Cost or other basis

20. Depreciation deduction

21. Elected section 179 cost

22. Business Locality Code



ANDREW

COHEN

RITA

COHEN

Your/ Spouse SSN	You/ Spouse	Virginia Withholding	Employer FEIN	Virginia Account Number	Virginia Wages, tips, other comp.
	1	1.			266.
	1	83.			4498.
	2				1024.

Total Virginia Withholding:

SSN

VA Withholding

YOU

84.

SPOUSE

TOTAL NUMBER OF W2'S AND 1099'S

04

AVOID DELAYS in processing your return! Be sure to enter all information including Employer's FEIN.

Spouse Tax Adjustment Worksheet

Be sure to enter the Virginia Adjusted Gross Income for each spouse on Lines 16a & 16b of Form 760.

PART 1: SEPARATE YOUR INCOME AND EXEMPTIONS

1. Enter the portion of the Virginia Adjusted Gross Income (VAGI) on Line 9 of Form 760 that is related to each spouse . . .

You	Spouse
296813.	152663.

Use the worksheet at the bottom of the page to compute the separate VAGI for each spouse.

2. Enter separate personal exemption amounts. Enter a 1 in the boxes that apply and multiply the total by \$800.

Add \$900 to the total to compute the personal exemptions for you and spouse.

	65 or over	+	Blind	=	Total	x \$800 =		+	\$900 =	900.
You:										
Spouse:										900.

3. Subtract Line 2 from Line 1. If either amount is 0 or less, stop here; you do not qualify for this credit

295913.	151763.
---------	---------

PART 2: CALCULATE YOUR TAX ADJUSTMENT

4. Enter the taxable income from Line 14 on Form 760 427391.

5. Enter the smaller amount from Line 3 above.
- If this amount is larger than \$17,000 and Line 4 is larger than \$34,000, skip to Line 12 and enter \$259 as the credit.**
- 151763.

6. Subtract Line 5 from Line 4 (if \$0 or less, enter \$0) 275628.

7. Divide the amount on Line 4 by 2 213696.

8. Enter the tax on the
- smaller**
- amount from Line 5 or Line 7. Refer to the tax table or rate schedule 8468.

9. Enter the tax on the
- larger**
- amount from Line 6 or Line 7. Refer to the tax table or rate schedule 15591.

10. Add Lines 8 and 9 24059.

11. Enter the tax from Line 15 on Form 760 24317.

- 12.
- TAX ADJUSTMENT:**
- Subtract Line 10 from Line 11. Enter this amount on Line 16 of Form 760 259.

The Spouse Tax Adjustment cannot exceed \$259

Worksheet for Determining Separate Virginia Adjusted Gross Income**STEP 1 - Determine Separate Federal Adjusted Gross Income**

	You	Spouse
1. Wages, salaries, etc. 1	4764.	1024.
2. Taxable interest and dividend income 2	45645.	318.
3. Taxable refunds, adjustments or offsets of state and local income tax 3	1866.	1865.
4. Business income 4	-3882.	-4546.
5. Capital gains/losses and other gains/losses 5	252341.	159655.
6. Taxable pensions, annuities and IRA distributions 6		
7. Rents, royalties, partnerships, estates, trusts, etc. 7	-55.	NONE
8. Other income (Farm Income, taxable social security, etc.) 8		
9. Gross income - add Lines 1 through 8 9	300679.	158316.
10. Adjustments to gross income 10	4000.	1788.
11. FAGI-subtract Line 10 from Line 9 11	296679.	156528.

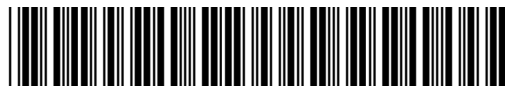
(The total of both columns should equal your joint FAGI reported on your 1040, 1040A or 1040EZ)

STEP 2 - Determine Separate Virginia Adjusted Gross Income

12. Total additions to FAGI (Form 760, Line 2) 12		
13. Sub-total - add Lines 11 and 12 13	296679.	156528.
14. Age Deduction (Form 760, Line 4) 14		
15. Social Security Act and Tier 1 Railroad Retirement Act Benefits (Form 760, Line 5) 15		
16. State income tax refund or overpayment credit reported as income on your federal return (Form 760, Line 6) 16	1866.	1865.
17. Other Subtractions (Form 760, Line 7) 17	-2000.	2000.
18. Total Subtractions from FAGI - add Lines 14, 15, 16, and 17 18	-134.	3865.
19. Subtract Line 18 from Line 13. These are your separate VAGI amounts to be used on Line 1 of the Spouse Tax Adjustment Worksheet 19	296813.	152663.

(The total of both columns should equal your combined VAGI reported on Line 9 of your 760)

Enter VAGI amounts here
and on Form 760, Line 16a & 16b

**760C - 2007 Underpayment of Virginia Estimated
Tax by Individuals, Estates and Trusts**

● Attach this form to Form 760, 763, 760PY or 770.

Fiscal Year Filers: Enter beginning date _____ 20 _____, ending date _____ 20 _____, and check here ☐

First Name, Middle Initial and Last Name (of Both if Joint) - OR - Name of Estate or Trust ANDREW COHEN & RITA COHEN		Your Social Security Number or FEIN [REDACTED]	
If Estate or Trust, Name and Title of Fiduciary		Spouse's Social Sec [REDACTED]	
		Office Use SC	Office Use Payment

Part I - Compute Your Underpayment

1. 2007 Income Tax Liability After Spouse Tax Adjustment and Nonrefundable Credits (If \$150 or less, you are not required to file Form 760C.)	1.	24,058.
2. Enter 90% of the Amount Shown on Line 1	2.	21,652.
3. 2006 Income Tax Liability After Spouse Tax Adjustment and Nonrefundable Credits	3.	5,326.
4. Enter the Amount From Line 2 or Line 3, Whichever is Less	4.	5,326.
5. Enter the Number of Installment Periods for Which You Were Liable to Make Payments	5.	4

Line 6 Through 14: Complete Each Line Across All Columns Before Continuing to Next Line

	A	B	C	D
6. Due Dates of Installment Payments	May 1, 2007	June 15, 2007	Sept. 15, 2007	Jan. 15, 2008
7. Tax Liability (Divide the amount on Line 4 by the number of installments reported on Line 5 and enter the result in the appropriate columns.)	1,332.	1,332.	1,332.	1,330.
8. Enter the Income Tax Withheld for Each Installment Period	21.	21.	21.	21.
9. Enter the Overpayment Credit From Your 2006 Income Tax Return	NONE			
10. Enter the Amount of Any Timely Payment Made for Each Installment Period in the Appropriate Column (Do not enter any late payments.)	6,000.	6,000.	6,400.	
11. Underpayment or [Overpayment] (Subtract Lines 8, 9 and 10 From Line 7. See instructions for overpayment.)	-4,689.	-4,689.	-5,089.	1,309.
12. Other Payments (Enter the payments from the Late Payment/Overpayment Table below, beginning with the earliest payment recorded. Do not enter more than the underpayment in any column.)				
	Date	Amount		
a. First Payment				
b. Second Payment				
c. Third Payment				
d. Fourth Payment				
13. Enter the Total Timely Payments Made as of Each Installment Due Date From Lines 8, 9, 10 and 12 (For ex., in Column A enter all payments made by May 1, 2007)	6,021.	6,021.	6,421.	21.
14. Subtract Line 13 From Line 7 (If the sum of all underpayments (do not include any OVERPAYMENTS) reported is \$150 or less, stop here; you are not subject to an addition to tax. If your underpayments total more than \$150, proceed to Part II.)				1,309.

Late Payment/Overpayment Table (See Instructions for Lines 11 and 12.)

Continued on Back ►

Date of Payment	Date of Payment	Date of Payment	Date of Payment
Payment Amount	Payment Amount	Payment Amount	Payment Amount
\$	\$	\$	\$

Va. Dept. of Taxation 760C F 2601033 (REV 12/07)

1062
7Y5605 1.000

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760C - 2007

Page 2



Part II - Exceptions That Void the Addition to Tax

		A May 1, 2007	B June 15, 2007	C Sept. 15, 2007	D Jan. 15, 2008
15. Total Amount Paid and Withheld From January 1, 2007 Through the Installment Date Indicated		6,021.	12,042.	18,463.	18,484.
16. Exception 1: Prior Year's Tax (Multiply the 2006 tax by the percentage in each col.)	100% of 2006 Tax 5,326.	25% 1,332.	50% 2,663.	75% 3,995.	100% 5,326.
17. Exception 2: Tax on Prior Year's Income Using the 2007 Rates and Exemptions (Multiply the 2006 tax by the percentage in each col.)	100% of Tax 5,303.	25% 1,326.	50% 2,652.	75% 3,977.	100% 5,303.
18. Exception 3 Worksheet: Tax on Annualized 2007 Income (Use the formula below to compute the amount on lines 18a, b and c for each col.) Lines 18a, b and c: April 30 column: Multiply the actual amount for the period ended April 30, 2007, by 3. May 31 column: Multiply the actual amount for the period ended May 31, 2007, by 2.4. August 31 column: Multiply the actual amount for the period ended August 31, 2007, by 1.5.					
From January 1 to:		April 30	May 31	August 31	
a. Annualized Virginia Adjusted Gross Income (VAGI) for Each Period		449,476.	449,476.	449,476.	
b. Compute the Annualized Itemized Deductions Using the Formula Above OR Enter the Full Standard Deduction in Each Column If You Did Not Claim Itemized Deductions		14,485.	14,485.	14,485.	
c. Compute the Annualized Child and Dependent Care Expenses and other deductions for Each Period					
d. TOTAL Dollar Amount of Exemptions Claimed on Your Return		3,600.	3,600.	3,600.	
e. Virginia Taxable Income (Subtract Lines 18b, c and d from Line 18a.)		431,391.	431,391.	431,391.	
f. Virginia Tax (Enter the Va. income tax on the amount(s) shown on line 18e above.)		24,547.	24,547.	24,547.	
g. Multiply Line 18f by the Percentage Shown for Each Period		22.5% 5,523.	45% 11,046.	67.5% 16,569.	
19. Exception 4 Worksheet: Tax on 2007 Income Over a 4, 5 and 8 Month Period* (* 3, 4 and 7 months for estates and trusts)					
From January 1 to:		April 30	May 31	August 31	
a. Enter Your Virginia Adjusted Gross Income (VAGI) for Each Period		149,825.	187,282.	299,651.	
b. Enter the Itemized Deductions Claimed for Each Period OR (If Greater) the Full Standard Deduction		4,828.	6,035.	9,657.	
c. Enter the Child and Dependent Care Expenses and other deductions for Each Period		1,200.	1,500.	2,400.	
d. Enter the Total Dollar Amount of Exemptions Claimed on Your Return		143,797.	179,747.	287,594.	
e. Virginia Taxable Income (Subtract Lines 19b, c and d from Line 19a.)					
f. Virginia Tax (Enter the Va. income tax on the amount(s) shown on Line 19e above.)		8,011.	10,078.	16,279.	
g. Multiply Line 19f by 90% (.90) for Each Period		7,210.	9,070.	14,651.	

Note
Estates and trusts should use end dates of March 31, April 30 & July 31.**Note**
Exceptions 3 and 4 do not apply to the fourth installment period.

Part III - Compute the Addition to Tax

If an exception has been met (Part II) for any installment period, complete the column for that period as follows: write "Exception" and the exception number (1, 2, 3, or 4) on Line 20; skip Lines 21 through 23; and enter "0" on Line 24. For all other periods, complete each line as instructed below.

		A May 1, 2007	B June 15, 2007	C Sept. 15, 2007	D Jan. 15, 2008
20. Amount of Underpayment From Line 14, Part I					
21. Date of Payment From Line 12, Part I (If no payments were entered on Line 12, enter the actual date of payment or May 1, 2008, whichever is earlier.)					
22. a. Number of Days After Installment Due Date Through Date Paid or December 31, 2007, Whichever Is Earlier (If December 31, 2007, is earlier, enter 244, 199, & 107 respectively.)					
b. Number of Days After December 31, 2007 (Jan. 15, 2008 for 4th installment), Through Date Paid or May 1, 2008, Whichever is Earlier (If May 1, 2008, is earlier, enter 122, 122, 122 and 107.)					
		15	15	122	
23. a. Multiply the Number of Days in Each Column on Line 22a by the Daily Rate .00027 (10% Per Annum)					
b. Multiply the Number of Days in Each Column on Line 22b by the Daily Rate .00024 (9% Per Annum)					
		0.00360	0.00360	0.02928	
c. Add Lines 23a and 23b in Each Column and Enter the Total Here					
		0.00360	0.00360	0.02928	
24. Multiply the Amount on Line 20 by Line 23c for Each Column					

25. Addition to Tax
(Total the amounts on Line 24. Enter here and on the "Addition to Tax" line on your income tax return.)

--

COHEN

PERSONAL TRAINING

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**SCHEDULE C
(Form 1040)****Profit or Loss From Business**

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

OMB No. 1545-0074

2007Attachment
Sequence No. **09**Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040NR, or 1041.

▶ See Instructions for Schedule C (Form 1040).

Name of proprietor

RITA COHEN

Social security number (SSN)

A Principal business or profession, including product or service (see page C-2 of the instructions)**B** Enter code from pages C-8, 9, & 10

INDEPENDENT ARTISTS, WRITERS, PERFORMERS

711510

C Business name. If no separate business name, leave blank.**D** Employer ID number (EIN), if any

RITA A. COHEN

E Business address (including suite or room no.) ▶ 3750 JEFFERSON BLVD.

City, town or post office, state, and ZIP code VIRGINIA BEACH, VA 23455

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶**G** Did you "materially participate" in the operation of this business during 2007? If "No," see page C-3 for limit on losses ☒ Yes ☐ No**H** If you started or acquired this business during 2007, check here ▶ ☐**Part I Income**

1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here STMT. 3. ▶ <input type="checkbox"/>	1	2,400.
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	2,400.
4 Cost of goods sold (from line 42 on page 2)	4	
5 Gross profit. Subtract line 4 from line 3	5	2,400.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3)	6	
7 Gross income. Add lines 5 and 6 ▶	7	2,400.

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8 Advertising	8	150.	18 Office expense	18	
9 Car and truck expenses (see page C-4) . . . STMT. 3.	9	1,285.	19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see page C-5):		
11 Contract labor (see page C-4)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-4)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	397.
15 Insurance (other than health)	15		23 Taxes and licenses	23	
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	1,075.
b Other	16b		b Deductible meals and entertainment (see page C-6)	24b	340.
17 Legal and professional services	17		25 Utilities	25	
28 Total expenses before expenses for business use of home. Add lines 8 through 27 in columns ▶	28	6,946.	26 Wages (less employment credits)	26	
29 Tentative profit (loss). Subtract line 28 from line 7	29	-4,546.	27 Other expenses (from line 48 on page 2)	27	3,699.
30 Expenses for business use of your home. Attach Form 8829	30				

31 **Net profit or (loss).** Subtract line 30 from line 29.

- If a profit, enter on both **Form 1040, line 12,** and **Schedule SE, line 2,** or on **Form 1040 NR, line 13** (statutory employees, see page C-7). Estates and trusts, enter on Form 1041, line 3.
- If a loss, you **must** go to line 32.

32 If you have a loss, check the box that describes your investment in this activity (see page C-7).

- If you checked 32a, enter the loss on both **Form 1040, line 12,** and **Schedule SE, line 2,** or on **Form 1040NR, line 13** (statutory employees, see page C-7). Estates and trusts, enter on Form 1041, line 3.
- If you checked 32b, you **must** attach **Form 6198.** Your loss may be limited.

31 -4,546.

32a ☒ All investment is at risk.
32b ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see page C-8 of the instructions.

Schedule C (Form 1040) 2007

Part III Cost of Goods Sold (see page C-7)

33	Method(s) used to value closing inventory:	a <input type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation <input type="checkbox"/> Yes <input type="checkbox"/> No			
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4	42		

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file Form 4562.

43	When did you place your vehicle in service for business purposes? (month, day, year) ► _____
44	Of the total number of miles you drove your vehicle during 2007, enter the number of miles you used your vehicle for: a Business _____ b Commuting (see instructions) _____ c Other _____
45	Do you (or your spouse) have another vehicle available for personal use? <input type="checkbox"/> Yes <input type="checkbox"/> No
46	Was your vehicle available for personal use during off-duty hours? <input type="checkbox"/> Yes <input type="checkbox"/> No
47 a	Do you have evidence to support your deduction? <input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

AUDITION EXPENSES	50.
VOICE TRAINING	1,690.
SHEET MUSIC	113.
COSTUMES	485.
MAKE UP AND HAIR	814.
PIANO ACCOMPANIEST	290.
PIANO TUNING	175.
PROFESSIONAL MAGAZINES, JOURNALS	82.
48 Total other expenses. Enter here and on page 1, line 27	48 3,699.

**SCHEDULE C
(Form 1040)****Profit or Loss From Business**

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

OMB No. 1545-0074

2007Attachment
Sequence No. **09**Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040NR, or 1041.

▶ See Instructions for Schedule C (Form 1040).

Name of proprietor

ANDREW COHEN

Social security number (SSN)

A Principal business or profession, including product or service (see page C-2 of the instructions)**B** Enter code from pages C-8, 9, & 10ALL OTHER PERSONAL SERVICES812990**C** Business name. If no separate business name, leave blank.**D** Employer ID number (EIN), if any**PERSONAL TRAINING****E** Business address (including suite or room no.) ▶ 3750 JEFFERSON BLVDCity, town or post office, state, and ZIP code VIRGINIA BEACH, VA 23455**F** Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶**G** Did you "materially participate" in the operation of this business during 2007? If "No," see page C-3 for limit on losses ☒ Yes ☐ No**H** If you started or acquired this business during 2007, check here ☒**Part I Income**

1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here <u>STMT. 4</u> ▶ <input type="checkbox"/>	1	<u>2,055.</u>
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	<u>2,055.</u>
4 Cost of goods sold (from line 42 on page 2)	4	
5 Gross profit. Subtract line 4 from line 3	5	<u>2,055.</u>
6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3)	6	
7 Gross income. Add lines 5 and 6	7	<u>2,055.</u>

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8 Advertising	8		18 Office expense	18	
9 Car and truck expenses (see page C-4) . . . <u>STMT. 4</u> . . .	9	<u>1,213.</u>	19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see page C-5):		
11 Contract labor (see page C-4)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-4)	13	<u>177.</u>	21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15	<u>172.</u>	23 Taxes and licenses	23	
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b		b Deductible meals and entertainment (see page C-6)	24b	
17 Legal and professional services	17		25 Utilities	25	
			26 Wages (less employment credits)	26	
			27 Other expenses (from line 48 on page 2)	27	<u>4,375.</u>
28 Total expenses before expenses for business use of home. Add lines 8 through 27 in columns	28				<u>5,937.</u>
29 Tentative profit (loss). Subtract line 28 from line 7	29				<u>-3,882.</u>
30 Expenses for business use of your home. Attach Form 8829	30				

31 **Net profit or (loss).** Subtract line 30 from line 29.

- If a profit, enter on both **Form 1040, line 12**, and **Schedule SE, line 2**, or on **Form 1040 NR, line 13** (statutory employees, see page C-7). Estates and trusts, enter on Form 1041, line 3.

- If a loss, you **must** go to line 32.

32 If you have a loss, check the box that describes your investment in this activity (see page C-7).

- If you checked 32a, enter the loss on both **Form 1040, line 12**, and **Schedule SE, line 2**, or on **Form 1040NR, line 13** (statutory employees, see page C-7). Estates and trusts, enter on Form 1041, line 3.
- If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.

31 -3,882.
32a ☒ All investment is at risk.
32b ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see page C-8 of the instructions.

Schedule C (Form 1040) 2007

Part III Cost of Goods Sold (see page C-7)

33	Method(s) used to value closing inventory:	a <input type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," attach explanation			
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4			42

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file Form 4562.

43	When did you place your vehicle in service for business purposes? (month, day, year) ▶	
44	Of the total number of miles you drove your vehicle during 2007, enter the number of miles you used your vehicle for:	
	a Business	b Commuting (see instructions)
	c Other	
45	Do you (or your spouse) have another vehicle available for personal use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
46	Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
47 a	Do you have evidence to support your deduction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," is the evidence written?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

EDUCATION	869.
UNIFORMS	287.
CERTIFICATION	1,709.
BELT TESTING	1,510.
48 Total other expenses. Enter here and on page 1, line 27	48 4,375.

**SCHEDULE E
(Form 1040)****Supplemental Income and Loss**
(From rental real estate, royalties, partnerships,
S corporations, estates, trusts, REMICs, etc.)

OMB No. 1545-0074

2007Attachment
Sequence No. **13**Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ See Instructions for Schedule E (Form 1040).

Name(s) shown on return

Your social security number

ANDREW COHEN & RITA COHEN

Part I Income or Loss From Rental Real Estate and Royalties Note. If you are in the business of rentingSchedule C or C-EZ (see page E-3). If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

1 List the type and location of each rental real estate property:		2 For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of:		Yes	No
A	B	C			
			• 14 days or		
			• 10% of the total days rented at fair rental value?		
			(See page E-3)		

Income:		Properties			Totals
		A	B	C	(Add columns A, B, and C.)
3 Rents received	3				3
4 Royalties received	4				4
Expenses:					
5 Advertising	5				
6 Auto and travel (see page E-4) . . .	6				
7 Cleaning and maintenance	7				
8 Commissions	8				
9 Insurance	9				
10 Legal and other professional fees . .	10				
11 Management fees	11				
12 Mortgage interest paid to banks, etc. (see page E-4)	12				12
13 Other interest	13				
14 Repairs	14				
15 Supplies	15				
16 Taxes	16				
17 Utilities	17				
18 Other (list) ▶	18				
19 Add lines 5 through 18	19				19
20 Depreciation expense or depletion (see page E-5)	20				20
21 Total expenses. Add lines 19 and 20	21				
22 Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-5 to find out if you must file Form 6198	22				
23 Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may be limited. See page E-5 to find out if you must file Form 8582 . Real estate professionals must complete line 43 on page 2	23	()	()	()	
24 Income. Add positive amounts shown on line 22. Do not include any losses	24				
25 Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here	25				()
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 . . .	26				

For Paperwork Reduction Act Notice, see page E-7 of the instructions.

Schedule E (Form 1040) 2007

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Your social security number

ANDREW COHEN & RITA COHEN

Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.**Part II Income or Loss From Partnerships and S Corporations** **Note.** If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (e) on line 28 and attach Form 6198. See page E-1.

- 27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? ☐ Yes ☒ No
If you answered "Yes," see page E-6 before completing this section.

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A	VIANIX LC	P			
B	ENVEST II LLC	P			
C					
D					

STMT 5 Passive Income and Loss			Nonpassive Income and Loss		
(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1	
A	NONE				
B	55.				
C					
D					
29a Totals	NONE				
b Totals	55.				
30 Add columns (g) and (j) of line 29a					30 NONE
31 Add columns (f), (h), and (i) of line 29b					31 (55.)
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below					32 -55.

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer identification number
A		
B		
Passive Income and Loss		Nonpassive Income and Loss
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1
A		
B		
34a Totals		
b Totals		
35 Add columns (d) and (f) of line 34a		35
36 Add columns (c) and (e) of line 34b		36 ()
37 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below		37

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see page E-7)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below					39

Part V Summary

40 Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41 Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18	41	-55.
42 Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code T; and Schedule K-1 (Form 1041), line 14, code F (see page E-7)	42	
43 Reconciliation for real estate professionals. If you were a real estate professional (see page E-2), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

Schedule E (Form 1040) 2007

SUPPLEMENT TO VIRGINIA FORM 760CG

FEDERAL INCOME AND ADJUSTMENTS INFORMATION

WAGES, SALARIES, TIPS, ETC.	5,788.
TAXABLE INTEREST INCOME	2,580.
DIVIDEND INCOME	43,383.
TAXABLE REFUNDS OF STATE & LOCAL INCOME TAX	3,731.
BUSINESS INCOME (LOSS)	-8,428.
CAPITAL GAIN (LOSS)	411,996.
PARTNERSHIP INCOME (LOSS)	-55.
TOTAL INCOME	458,995.
IRA DEDUCTION	5,788.
TOTAL ADJUSTMENTS TO INCOME	5,788.
FEDERAL ADJUSTED GROSS INCOME (FORM 760, LINE 1)	453,207.

SUPPLEMENT TO VIRGINIA FORM 760CG
=====

ADJUSTMENTS TO INCOME

OTHER SUBTRACTIONS FROM INCOME

33 VIRGINIA COLLEGE SAVINGS PLAN PAYMENTS	47000.
33 CARRYOVER TO NEXT YEAR	-45000.
33 VIRGINIA COLLEGE SAVINGS PLAN PAYMENTS	47000.
33 CARRYOVER TO NEXT YEAR	-45000.
SEE DEDUCTIONS	-4000.

TOTAL	NONE
	=====

SUPPLEMENT TO SCHEDULE C

GROSS RECEIPTS OR SALES - SCHEDULE C, LINE 1

BUSINESS NAME: RITA A. COHEN

LONG LEAF OPERA HOUSE 2,400.

TOTAL TO SCHEDULE C, LINE 1 2,400.

CAR AND TRUCK EXPENSES - SCHEDULE C, LINE 9

STANDARD MILEAGE RATE METHOD

BUSINESS NAME: RITA A. COHEN

VEHICLE 1

BUSINESS MILES 2,600.

X 0.485

1,261.

STANDARD MILEAGE FOR THIS VEHICLE 1,261.

STATE AND LOCAL PROPERTY TAXES (BUS. PORTION) 24.

TOTAL EXPENSE FOR THIS VEHICLE 1,285.

TOTAL TO SCHEDULE C, LINE 9 1,285.

SUPPLEMENT TO SCHEDULE C

GROSS RECEIPTS OR SALES - SCHEDULE C, LINE 1

BUSINESS NAME: PERSONAL TRAINING

FITNESS RESOURCE INC	1,186.
JAN'S GYM	869.

TOTAL TO SCHEDULE C, LINE 1	2,055.
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CAR AND TRUCK EXPENSES - SCHEDULE C, LINE 9

STANDARD MILEAGE RATE METHOD

BUSINESS NAME: PERSONAL TRAINING

VEHICLE 1

BUSINESS MILES	2,500.
X	0.485

1,213.

STANDARD MILEAGE FOR THIS VEHICLE	1,213.
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TOTAL TO SCHEDULE C, LINE 9	1,213.
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SUPPLEMENT TO SCHEDULE E

PART II, INCOME OR LOSS FROM PARTNERSHIPS AND S CORPORATIONS
COLUMNS (F) & (G) - PASSIVE INCOME OR LOSS

K-1 NAME: VIANIX LC
ID NUMBER:

DESCRIPTION	INCOME/LOSS
ORDINARY INCOME OR LOSS	-7,858.
LESS:	
SUSPENDED LOSS CARRYOVER	16,464.
PLUS:	
DISALLOWED PASSIVE LOSS	24,322.
ALLOWABLE INCOME/LOSS	NONE

K-1 NAME: ENVEST II LLC
ID NUMBER:

DESCRIPTION	INCOME/LOSS
ORDINARY INCOME OR LOSS	-5,883.
OTHER RENTAL INCOME OR LOSS	-3,108.
PLUS:	
OTHER INCOME	1.
LESS:	
OTHER	10.
NET INCOME/LOSS BEFORE LIMITATIONS	-9,000.
LESS:	
SUSPENDED LOSS CARRYOVER	8,255.
PLUS:	
DISALLOWED PASSIVE LOSS	17,200.
ALLOWABLE INCOME/LOSS	-55.